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CONGREGATE HOUSING SERVICES: BENEFITS OF
SUPPORTIVE ENVIRONMENTS IN ASSISTED
HOUSING FOR THE RURAL ELDERLY

MF 143

HEARING

BEFORE THE

SUBCOMMITTEE ON

HOUSING AND CONSUMER INTERESTS

OF THE

SELECT COMMITTEE ON AGING
HOUSE OF REPRESENTATIVES

NINETY-NINTH CONGRESS

SECOND SESSION

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CONGREGATE HOUSING SERVICES: BENEFITS OF SUPPORTIVE ENVIRONMENTS IN ASSIST- ED HOUSING FOR THE RURAL ELDERLY

TUESDAY, JANUARY 21, 1986

HOUSE OF REPRESENTATIVES,
SELECT COMMITTEE ON AGING,
SUBCOMMITTEE ON HOUSING AND CONSUMER INTERESTS.

Jamestown, NY.

The subcommittee met, pursuant to notice, at 2:45 p.m. in Christ Chapel, Ecumenical Campus of Lutheran Social Services, 715 Falconer Street, Jamestown, NY. Hon. Don Bonker (chairman of the subcommittee) presiding.

Members present: Representatives Bonker and Lundine.

OPENING STATEMENT OF CHAIRMAN DON BONKER

Mr. BONKER. The Subcommittee on Housing and Consumer Interests of the House Select Committee on Aging will come to order.

Before I begin with my opening remarks I would like to call upon the resident Congressman from this district, the very distinguished Stan Lundine, for his opening comments.

STATEMENT OF REPRESENTATIVE STAN LUNDINE

Mr. LUNDINE. Thank you, Don Bonker, and thank you for coming to Chautauqua County and to the southern tier to carry on what I know has been a careful investigation into the housing opportunities in rural America.

It is fitting that we should meet in this place because the Ecumenical Campus here has been the center for some very innovative housing and health care facilities, ranging from very nice garden apartments to a highrise to full skilled nursing care under the original sponsorship of the Lutheran Social Services Board and with the participation of other denominations as well.

I am delighted that we have such an excellent panel of witnesses. I thank Mr. Labourdette, who is our leader for rural housing throughout New York, and our local and regional witnesses.

I am not going to take the time of the committee or the people interested here to read the opening statement. However, I would ask unanimous consent that it be included in the record in its entirety. Let me just say that the United States has reduced the amount we spend to support housing for elderly and poor Americans from about \$30 billion 5 years ago to about \$10 billion today. Obviously you cannot do that without cutting into the resources available. But I think it is very important we spend our time as

advocates for older Americans, making sure that we are getting all the housing and all the services we can for the amount of funds that we have remaining. And I thank this distinguished committee under its former chairman, Claude Pepper, whom many of you know, and under the current chairman, Mr. Roybal, from California and two distinguished subcommittee chairs for their efforts on the behalf of Older Americans. My colleague Mr. Biaggi, Mario Biaggi, from New York City—that is almost as far as Washington State from here, has been in this very room holding hearings on behalf of another subcommittee of the Aging Committee several years ago. Certainly Don Bonker who has been interested in housing for some time, has given renewed leadership to this area—the area of providing housing for older Americans, and we are delighted to have you here. I am looking forward to the comments of the witnesses.

[The prepared statement of Mr. Lundine follows:]

PREPARED STATEMENT OF REPRESENTATIVE STAN LUNDINE

Welcome to this field hearing of the Select Committee on Aging's Subcommittee on Housing and Consumer Interests.

Providing decent, affordable housing for elderly people living in rural areas has long been a challenge. Lack of adequate transportation services, a shortage of rental units, and geographical isolation mean that older people in rural areas are often faced with the problem of finding a living environment that will provide them with both the independence they desire and the care they may at times need.

The problems faced by the elderly are problems that all of us must eventually face. I would like to share with you some information that comes from the testimony of Mr. Gene Solan, who is the Coordinator of the Rural Aging Services Partnership Program (RASP) at the New York State Office for the Aging. Mr. Solan was unable to be here today, and I would like permission to submit his testimony in its entirety for the record.

The elderly population of New York is expected to continue to grow during the coming decades. In 1980, New York's population of people 60 years of age or older was 3,091,774. This is a 6.3% increase since 1970. By 1990, we can expect that there will be 3,223,811 people over 60 in New York, or 18% of the state's population. Not only are the numbers of people over 60 increasing, the percentage of people who are much older (75 and up) is also climbing. These people will require increasing levels of care.

In rural areas such as the Southern Tier, many elderly people live in older homes with inadequate heating or plumbing systems. Many live in isolated areas and have no access to transportation. A great number of older people live alone. Many of these would benefit from home repair and maintenance programs and improved transportation services.

While those people who wish to stay in their own homes should be able to do so as long as possible, many elderly people would welcome the opportunity to move into a rental unit that provided convenience and security. Unfortunately, in rural areas such alternatives are scarce.

One of the more innovative concepts in housing for the elderly has been congregate housing. In congregate housing arrangements, elderly people live in their own apartments in a complex that provides them with optional communal meals every day, planned activities, and a number of services. In the late 1970's Congress initiated a pilot congregate housing program administered by the Farmer's Home Administration. One of the model projects, Portage Hill, was opened here in Mayville in 1980.

Portage Hill was indeed a model community. Residents enjoyed the privacy and independence of having their own apartments and the security of a supportive community. Unfortunately, changes in federal policy by the Administration have resulted in cutbacks in funding for the FmHA and the congregate housing program, forcing projects such as Portage Hill to reduce or eliminate many of the services that were provided in the past.

During today's hearing, we will hear from Mr. Pierre Labourdette, who is Director of the New York State Farmers Home Administration. Congressman Bonker and

going out to restaurants every evening. All of us who are either senior citizens or have parents who are, can appreciate what congregate housing represents to Americans who have these needs.

We are pleased to be in Jamestown to have the benefit of the experience that is known in this area, and to have such a distinguished panel of witnesses. We will be hearing from several important officials and others who have first hand experience with this concept.

Without further comment, I would like to have my statement offered for the official record, and we will now proceed with our first witness. I would also begin with an apology to him and others that we could not follow through with our earlier hearing which was scheduled but somewhat disrupted by an important legislative vote in Washington, DC. We are happy to make good on this hearing, and we can proceed with our distinguished witnesses.

[The prepared statement of Chairman Don Bonker follows:]

PREPARED STATEMENT OF REPRESENTATIVE DON BONKER

Good afternoon. It is my pleasure to convene this hearing of the Subcommittee on Housing and Consumer Interests of the Select Committee on Aging, at the request of my good friend and colleague, Stan Lundine, to assess the needs of the rural elderly in assisted housing and to examine the FMHA congregate services demonstration project.

Three months ago I chaired a hearing in Washington on the Department of Housing and Urban Development's Congregate Housing Services Program and heard from program administrators who told me that the program has been very successful in achieving both cost-savings and preventing premature institutionalization. In fact, data provided to the subcommittee showed that the average cost of keeping a resident in a congregate housing program was about one-fourth the cost of a Medicaid nursing home. It is my firm belief that providing congregate services to older Americans in assisted housing, not only can foster independence and prevent premature institutionalization, but can produce long-term savings in the Medicaid Program by keeping senior citizens out of nursing homes and helping them stay at home longer in a more cost-effective manner.

I am pleased to be in Jamestown today to hear from our witnesses who have experience in working with the elderly in rural areas. The needs of the over seven million older Americans living in rural areas are unique. The isolation of a rural environment is often seemingly more tranquil than urban environs—less crime, lower costs of living, a healthier atmosphere for living. Unfortunately, our older rural population often is isolated from services provided to senior citizens such as transportation and social services, and access is often difficult to senior nutrition sites and health services. My own district in the State of Washington has a large population of older Americans living in rural areas, and many of the senior citizens from my district share these same problems.

For these reasons, I believe that this hearing is both timely and of great importance and I look forward to hearing from our witnesses today about their experiences working with the rural elderly.

Mr. BONKER. I would like to now introduce our leadoff witness, who is the director of the New York State Farmers' Home Administration in Syracuse, NY, Mr. Pierre Labourdette. He is a banker and insurance broker by profession and has served as a secretary and treasurer of the Auburn Savings Bank in Auburn, NY. He has served as the treasurer of the Sadro Funding Corporation, which is a mortgage banking firm in Syracuse, and has had extensive experience in banking and financial institutions and comes to this position well equipped to deal with these unique problems.

It is a pleasure to have you and we are looking forward to your opening statement, Mr. Labourdette.

STATEMENT OF PIERRE L. LABOURDETTE, DIRECTOR, NEW YORK STATE FARMERS HOME ADMINISTRATION, SYRACUSE, NY

Mr. LABOURDETTE. Thank you, Chairman Bonker and Congressman Lundine, for the opportunity to be with you today to discuss the congregate housing program administered by the Farmers Home Administration as it applies to New York.

Congregate housing, as you know, is a form of assisted residential living. It is one type of planned, multiunit housing for older people who may need some assistance in their daily lives but do not require formal institutional services in the general sense.

More formally defined, congregate housing is a residential setting that is noninstitutional but adapted to meet the special needs of elderly persons through good design of the physical environment and the provision of some supportive services.

The Farmers Home Administration's entry into the congregate housing field began in 1979 with a memorandum of understanding with the Administration on Aging for the joint development of 10 sites as demonstration programs in 10 States. One of those was in New York, which I shall discuss in a moment.

Farmers Home provided for construction and operation under the regular rural rental housing program, title V, section 515 of the Housing Act. The agency made available about \$1 million of low-interest loans, with terms of 50 years, at each demonstration site. Farmers Home Administration also set aside rental assistance funds to cover all the units.

The Administration on Aging provided support services, such as meals, transportation, social and recreational activities and, for those in need, housekeeping and personal services. The AOA allocated up to \$85,000 a year for each site for the 3 years of AOA involvement.

In selecting the 10 counties, the two agencies took into account the percentage of elderly population, racial and ethnic mix, income levels, housing conditions, level of support from State and local officials, and the ability of the appropriate Area Agency on Aging to provide supportive services.

The 10 sites chosen were in California, Iowa, Michigan, Mississippi, New Hampshire, New Mexico, Oregon, South Dakota, Virginia and here in New York, at Mayville, a few miles away at the opposite end of Lake Chautauqua.

The Mayville project has 30 rental units, all with one bedroom. Three units are specially designed for occupancy by handicapped persons. The total project investment was \$1,204,000, including the loan of \$1,140,000 from Farmers Home.

I understand from our national office that Farmers Home is currently financing 17 or 18 congregate housing projects and is considering applications for several more. I believe all the original 10 demonstration projects are completed and fully occupied.

Mr. Chairman, that concludes my statement. Thank you.

Mr. BONKER. Well, thank you, Mr. Labourdette. I am interested to know why you did not mention in your statement that this demonstration project, which obviously has been very successful, is now terminated.

Mr. LABOURDETTE. It terminated in what sense? The 3 years are over that the AOA was involved. Yes.

Mr. BONKER. Was there any effort to extend the project or to make it permanent?

Mr. LABOURDETTE. I think the involvement of AOA, as I mentioned was the \$85,000 a year, that did terminate. Now much of that went for the restaurant which is located—the eating facility that is located at the site. There are meals that are being provided now. And most of the services have continued to be provided, perhaps on a slightly cutback basis.

Mr. BONKER. Well, was the Administration on Aging actively involved in providing the services that were inherent in the original demonstration project?

Mr. LABOURDETTE. It is my understanding the local people still are involved, yes.

Mr. BONKER. The local area agency is still involved?

Mr. LABOURDETTE. Yes.

Mr. BONKER. So you feel that the project was successful because it is ongoing?

Mr. LABOURDETTE. Yes, sir.

Mr. BONKER. Do you have any contractual arrangement at this time with the Area on Agency Aging?

Mr. LABOURDETTE. Frankly, we have no such arrangement. To us, we are handling it like any other elderly housing project.

Mr. BONKER. You do not have any contract with them for meals for instance?

Mr. LABOURDETTE. No, we do not.

Mr. BONKER. Transportation services?

Mr. LABOURDETTE. No, sir.

Mr. BONKER. But they still provide these services?

Mr. LABOURDETTE. They are still providing many of the services they did originally, yes.

Mr. BONKER. But it is not under a contract?

Mr. LABOURDETTE. No. This is between the owner of the project, the local elderly housing people, and the residents.

Mr. BONKER. Well, if the demonstration project were successful, then has Farmers Home Administration promoted other projects like this, other contractual arrangements with the Administration on Aging to expand this concept?

Mr. LABOURDETTE. We would like to very much. We have not had the opportunity. People have come to us, discussed it with us, we have given them all the information and encouraged them to set up like projects. At the present time there are none.

Mr. BONKER. Why?

Mr. LABOURDETTE. Other than the cost possibly being higher than a home for the elderly, I would say it is probably about 8 or 9 thousand dollars more per unit than the standard project. And it does require the involvement of the local elderly groups. And we have just not seen it.

Mr. BONKER. Mr. Lundine?

Mr. LUNDINE. What relationship does Farmers Home have with the New York State Housing Finance Agency and does Farmers Home have any cooperative working agreement with State agencies towards meeting housing needs?

Mr. LABOURDETTE. We are and we have been working for the last 3 years with a New York State housing and urban—housing and rural development group. In that they are providing rental assistance units specifically for Farmers Home Administration projects in the rural areas. If they had not been providing that help we would not have been able to make as many loans and seen as much construction as we have in the last few years. Nothing specifically for congregate housing.

Mr. LUNDINE. I recall that there was some problem a couple of years ago with regard to utilizing that State money. Has that been resolved to the best of your knowledge?

Mr. LABOURDETTE. All the problems have fairly well been resolved, yes.

Mr. LUNDINE. I would like to get away from congregate for a minute and ask your opinion about a couple of broader issues. One is the idea of vouchers. There have been proposed a voucher system for meeting the Nation's assisted housing needs, but many advocates for housing in rural areas say there is not an adequate supply of good housing in rural areas and therefore the voucher system may not work as well here as it would elsewhere. You have had the opportunity to observe the problem and survey inadequate housing stock throughout rural areas in New York State. Would it be your opinion that vouchers alone would meet the basic housing needs in rural New York?

Mr. LABOURDETTE. I must admit that I am not that familiar with the voucher system. But I would feel that anything that could help better housing develop under proper guidelines would be of great assistance.

Mr. LUNDINE. This may not be a fair question, and you can tell me if you do not think it is, but as you know the Reagan administration has proposed terminating the Farmers Home Administration and putting all the rural housing programs into the Department of Housing and Urban Development. As a State director of FMHA, you have been in a position to see the unique needs of the rural areas. What kind of an impact do you think this proposal would have on meeting the housing needs of rural areas in this State?

Mr. LABOURDETTE. I do not think that there is any question that it could be met. Whether it is through—the HUD or any other agency—well, no. It would have to be an agency that is familiar with housing. It is my understanding that if a transfer were completely made, the dollars would have to be split 50 percent rural, 50 percent urban. I do not think that HUD today is capable of taking over the programs that we administer. Mainly because most of their funds for housing is actually insured by banks, rather than making direct loans. They simply do not have the personnel today to handle what we are doing. But I think that could be developed.

Mr. LUNDINE. Thank you, Mr. Chairman; and thank you, Mr. Labourdette. If I could add one word that is not a question. Over the years that I have been in the Congress the Farmers Home Administration has been an agency easier to work with in the rural areas than the Department of Housing and Urban Development. And that includes Mr. Labourdette. He and I have had many common

interests and problems. And I thank you very much for coming down here today.

Mr. LABOURDETTE. Well, thank you for having me.

Mr. BONKER. Well, I think Mr. Lundine makes a good point. Most Members of Congress have had a very good working relationship with Farmers Home Administration. And that is why we are disappointed to see the administration as anxious to move you out of this area and consolidate it with what may be left of HUD. We feel that there are distinct needs in rural areas that you are well equipped to meet.

I would like to ask one more question before you depart—you know this demonstration project was conceived to bring two agencies together to identify a certain need and see if this approach could help meet unique needs of the senior citizens. It seems to have worked well in those demonstration areas.

Mr. LABOURDETTE. Yes.

Mr. BONKER. I am disappointed to see that it is not continuing or being expanded. Has Farmers Home Administration gotten word or an official directive from Washington, DC, that you should phase out of this program and not encourage further demonstration projects or expansion of the idea of teaming up with the Administration on Aging?

Mr. LABOURDETTE. I have heard no such word. I know the people in Washington directly in our housing division do encourage, particularly working—well, all our divisions particularly working with other sources, be it other Federal agencies; be it the State; or be it private.

Mr. BONKER. Well, if it is such a good project and everybody is so anxious to promote it, why are we not having more examples?

Mr. LABOURDETTE. I can only answer for the part of Farmers Home Administration. I do not think it is any secret that we run four separate programs. Our farm programs are very, very complicated and take up a great deal of our time today. And I have to say that if there are two groups that I enjoy working with more, that is with the elderly and the other is with agriculture. We are undermanned. We do not have the human resources to deliver our programs the way I would like to be able to do them. I would like to be able to get out and be an advocate for these programs. But I do not have the time and my people really do not have the time to do that.

Mr. BONKER. So you are saying that there is a need and that you have a personal commitment, your agency has a commitment, I assume that the Administration on Aging has a commitment; but you are short staffed, you lack resources and you cannot carry out this mandate?

Mr. LABOURDETTE. That is right.

Mr. BONKER. Has this all occurred within the last 3 or 4 years?

Mr. LABOURDETTE. Well, no, I think it has been more than that. But it certainly—the farm economy has been in that State really for the last 3 or 4 years which is demanding so much more of our time because other credit sources are not providing the credit and we have to step in and do it.

Mr. BONKER. You are saying, then that the problem is due more to the crisis in the farm areas and the needs that you must meet

there, rather than a cutback of Federal funds to help you get into programs like this?

Mr. LABOURDETTE. Yes.

Mr. BONKER. Well, that has been very helpful. Thank you.

Mr. LABOURDETTE. Thank you, sir.

Mr. BONKER. We shall now have a panel of four testify. And I would like to call to the witness table Sandy Cliver; Barbara Boon; Sherry Kennedy; and Kryn Hasard.

We will begin with Ms. Cliver who is a director of the Chautauqua County Office on Aging in Mayville, NY, and she will be accompanied by Mrs. Margaret Haggerty who is a resident of the Portage Hill, Mayville, NY, is that right?

Ms. CLIVER. Yes.

Mr. BONKER. OK, Ms. Cliver, would you please lead off?

**STATEMENT OF SANDY CLIVER, DIRECTOR, CHAUTAUQUA
COUNTY OFFICE ON AGING, MAYVILLE, NY**

Ms. CLIVER. Thank you very much. I would like to give my report, which is mostly on Portage Hill and I am using a portion of a booklet that was prepared by Ron Vieklos, who was our Coordinator of Aging Services. I have some copies, a limited number of copies if anyone is interested in having them later.

The Portage Hill congregate housing for the elderly project is the product of efforts of the MDS management and the Chautauqua County Office for the Aging. MDS management constructed Portage Hill, a 30 unit senior citizen housing project, specifically designed to accommodate the special needs of elderly tenants.

The Chautauqua County Office for the Aging provided congregate services which included meal service, housekeeper chores, personal care aid services, transportation and access services and social and recreational activities.

The project had a mixture of independent and congregate tenants. The number of residents designated as congregate service participants has averaged 9 persons or 30 percent of the 30 plus residents.

Portage Hill, the Chautauqua County congregate housing for the elderly demonstration project site, has been operating since December 15, 1980, and has been at full occupancy since March 1, 1981. Due to a series of delays relative to the Farmers Home Administration final approval of the funding package, the project ran approximately 9 months behind schedule. Federal grant support continued through December 1983. Contributions accumulated and collected throughout the project were used to help continue and maintain priority services using earned project income until July 1984. After July 1984, priority services continued utilizing Older Americans Act money and the New York State Community Services Fund.

The following are findings and implications of the Portage Hill demonstration project.

The relationship between the Chautauqua County Office for the Aging and the developer, MDS Management, remained close, cordial and productive throughout the course of the project. Prospective tenants who were candidates for congregate housing services were screened and selected by an assessment team composed of a

public health nurse, a representative of the developer, and the project director.

At the beginning of the project a joint agreement between the area agency and Portage Hill management was signed which remained in effect through the project.

Portage Hill helps meet needs for housing and services in the Mayville area. This move to Portage Hill has meant an improvement in housing quality; a decrease in housing related expenses; and a better access to support services.

Portage Hill has been designated a title III(c) nutrition program for the elderly since its inception. Most of the tenants at Portage Hill were well satisfied with congregate living, as evidenced by the fact that only one out of 50 residents left Portage Hill voluntarily since the project began. This was as of last year.

There has never been a shortage of tenants to replace those who for reasons of death or illness have moved out. The waiting list has exceeded 30 people throughout the life of the project.

It is evident that Portage Hill has kept some people out of low level domiciliary care facilities and health related facilities. However, it is difficult to say whether or not Portage Hill has kept people out of skilled nursing facilities.

Its environment may be conducive to keeping people independent and in the community, but Portage Hill is not a direct alternative to care in a skilled nursing facility. There are certain types of individuals that could not be cared for at Portage Hill, such as people with severe confusion and those requiring 24 hour care.

Arrangements have been made for continuation of care services, meal services, housekeeper chore services, access and transportation after the demonstration program has stopped, utilizing Older American Act funding and New York State Community Services for the Elderly funding.

Persons who require such services will be eligible for personal care aid services under Medicaid. The Chautauqua County departments of social service and health have agreed to continue providing health care services on site as required after the demonstration project funds expire.

The management structure at Portage Hill was a problem throughout the course of the project. MDS Management had no management personnel at the site. Housing management was handled by a rental agent located in Buffalo, which is 65 miles away, who visits the project at least once a month. Tenants can reach the management office by long distance telephone at any time when more pressing needs for management services arrive.

Management does—and I have to make a correction. It says a part time, and I believe the person is full time at the present time, maintenance person. This is the person that the tenants are supposed to report to along with the person in Buffalo.

The office for the aging provided a part-time project director and a part-time assistant who had offices on site. This arrangement caused confusion and role conflicts since the project director and his assistant, who reside one block from the site, ended up serving as resident managers. This issue caused a major problem now that the housing congregate funds are exhausted. Residents were accustomed to having the project director as their resident manager and

no provisions were made for an ongoing resident manager funded by the owners of the project.

Farmers Home Administration felt at the beginning of the project that a project of this size could not support a resident manager. Also Farmers Home Administration said there was no apartment for a resident manager. Among the long range implications of this decision were that the owners of the housing were subsidized through the demonstration grants by benefiting from the services of the project director and assistant.

Just a couple comments. Since the project began we have kept a nutrition site on Portage Hill. We had attempted to keep on-site cooking at Portage as long as we could, but at present we are going to cater meals which are quite a bit cheaper. This is something that the residents are not all that happy about, but yet the nutrition value is there. And with, as many of you know, with threats of the Gramm-Rudman coming very soon, we have to be careful of our moneys.

We had tried after the project to keep the project director on site. We kept him on by putting him on our staff as a focal point person serving all senior citizens. The Mayville Partnership requested that he not be there any more. We had to remove him from the site. This was something that the residents were very unhappy with.

Mr. BONKER. Mayville Partnership is who?

Ms. CLIVER. Mayville Partnership is the company that manages.

Mr. BONKER. Well thank you, Ms. Cliver.

Ms. CLIVER. You are welcome.

Mr. BONKER. With Ms. Cliver is Margaret Haggerty, who is a retired school teacher. And who is one of the original residents of Portage Hill. We would like to ask Ms. Haggerty if you could give the subcommittee an idea of your experience. We would like to hear whether you feel it is a good program and whether as a resident at Portage Hill, that you have witnessed decline in services as a result of the demonstration project being terminated.

STATEMENT OF MARGARET HAGGERTY, RESIDENT OF PORTAGE HILL, MAYVILLE, NY

Ms. HAGGERTY. In December 1980, I moved into the Portage Hill apartments. Only six apartments were completed at that time. Work was continuing on the other 24 apartments. When everything was completed, it was an ideal home for a senior citizen. I have been asked to tell about changes that have taken place at Portage Hill since that time.

Gradually through the succeeding year, services have been curtailed. First, our garbage which had been placed in the hall outside our doors for collection, was to be left in the entrance halls. Next, we were told to put it outdoors in the dumpster, unless we were handicapped.

Next, the delicious noon meals, which had been cooked in our kitchen were eliminated, in favor of catered meals. We were told that it was necessary because of insufficient funds. Most of the residents ate in our dining room when the meals were cooked in our kitchen. This greatly contributed toward a family atmosphere.

Many of the residents were unhappy with the quality of the catered meals and discontinued eating in the dining room at noon.

Craft classes which were excellent therapy for some of the residents, especially those who lived alone or who had no hobbies, were discontinued. Later on, exercise classes also were eliminated.

A very important change that occurred in 1985 was the removal of Arthur Chambers from his office in our building. It was mainly because of Art's presence at Portage Hill that there was such a friendly atmosphere among all the residents. His cheerful, ready help to all of us has been greatly missed. When he left our building, he told us that he would continue to help us in any way that he could, and he has always done so. However, his presence here was important, especially for these residents who are not well or who have no one to help them. It gave these people the feeling of security that they needed.

Gertrude Brumagin, Art's secretary, was also very helpful to all the residents. She, too, is no longer here. Her presence is also missed.

The last change concerning which we are quite upset is that the delicious Saturday and Sunday night dinners, which were cooked in our kitchen, are going to be discontinued February 1. Many of the residents enjoyed these dinners and they were helpful to restore the family atmosphere. One of the residents usually entertained by playing the organ prior to the dinners, and most of us looked forward to the dinners.

We have a very well equipped kitchen and after February 1, it will be used only for breakfast. The lady who cooks breakfast on the weekdays buys the food and is paid as a homemaker. The residents pay enough for breakfast to cover the cost of the food. The lady who cooked our weekend dinners had been cooking breakfast on the weekends. She also bought the food in the same way. She was paid for her work by the nutrition program. As of February 1, the lady who cooked on the weekends will no longer be at Portage Hill. The remainder of the time, our well equipped kitchen will not be used, except for breakfast on weekdays.

I feel that these changes have been detrimental to the health of many of the residents.

And also, I did find out today that meals-on-wheels will be provided for those who need it on the weekends, and I had not known that.

Mr. BONKER. Thank you very much, Ms. Haggerty. I am sure that Mr. Lundine and I will have questions as soon as we hear from the other two panelists.

We shall now go to Ms. Barbara Boon. And she is the Housing Director for Chautauqua Opportunities. For the past 3 years?

Mr. BONKER. You are working mainly with the section 8 program?

Ms. BOON. That is correct.

Mr. BONKER. Would you please give us the benefit of your testimony?

**STATEMENT OF BARBARA BOON, HOUSING DIRECTOR,
CHAUTAUQUA OPPORTUNITIES, INC., JAMESTOWN, NY**

Ms. Boon. Thank you. I currently do serve as the Housing Director for Chautauqua Opportunities. COI is one of 46 Community Action Programs across New York State and one of 900 nationwide, who entered into housing programs in order to address the needs of low-income individuals and families as a means of lessening the impact of poverty.

I especially appreciate the opportunity to speak before you today to address the special housing needs of elderly people in rural Chautauqua County. Various new options are known to be available to serve the housing needs of the elderly. They include but are of course not limited to, Home Sharing, Group Homes, Accessory Apartments, ECHO housing, and Shared Housing Options. COI is particularly interested in creating new housing options for the elderly through Shared Housing or house matching programs.

The primary problem in any housing endeavor undertaken by an agency such as COI is the lack of administrative moneys to effectively create the positive end result. Shared housing is a labor intensive task involving outreach to locate participants, the interviewing process, the analysis of the interview results, establishing a meeting and the matching of needs with wants, and last, but certainly not least, followup and counseling necessary to a positive match.

Community Services moneys, which have in the past provided the only accessible administrative dollars to test new innovative activities, have been cut back. New York State housing programs provide minimal, if any, administrative dollars to continue beyond initial startup. In addition to housing costs, there is money for support services. At the Federal level, this assistance has been level funded. At the State level however this type of assistance has decreased for several years. New York State's elderly population has been growing at a slower rate than the national rate. In contrast, Chautauqua County's elderly population has been increasing. Neither Federal nor State dollars have kept up with the need. Chautauqua County also has a larger number of very old persons, that is persons in the range of 75-85 years of age. These residents require more support services such as necessary transportation, in-home services and the provision of home delivered meals. Without these types of activities the ability to maintain the elderly in their homes is diminished. Congress must anticipate and consider the growth of these needs.

Another area of housing needs for assisting the elderly is the need for conversion of existing single to multiple units. This would serve to increase the number of housing units in rural Chautauqua County, it would upgrade existing structures, and it would provide income for the low income residents. Elderly persons are often forced to move from their homes because of their inability to maintain the structures. Conversion or homesharing would allow them to remain in their home. Both of these options are viable, positive solutions to the problems of older residents residing in older homes. Both of these programs require assistance in administrative money to produce the units and hard costs for the actual rehabilitation.

I urge you to consider this fact. Old housing is not bad, it is just old. Rehabilitation is far more desirable and less costly per unit than new construction. The end result is the same. Better housing for the elderly and the ability to help them retain the homes they have worked for all their lives.

Thank you.

Mr. BONKER. Thank you, Ms. Boon. Ms. Kennedy is the program director of the Enriched Housing Program; Supportive Services Corporation in Buffalo. And you have served as the program director of the enriched housing program for the past 4 years, helping people in rural western New York to remain independent.

This subcommittee is interested in having the benefit of your knowledge and your background in this area. So you may proceed.

STATEMENT OF SHERRY L. KENNEDY, PROGRAM DIRECTOR, ENRICHED HOUSING SUPPORTIVE SERVICES CORPORATION, BUFFALO, NY

Ms. KENNEDY. Thank you, Chairman Bonker and Congressman Lundine. I do have a detailed statement for the record, but what I would like to do during this time is just share with you some of the experiences that we have had. I think our program represents a very different piece of the pie and yet is similar in a lot of regards.

The enriched housing program is a unique concept developed in the mid 1970's and right now exists just in New York State. The concept is that people, elderly people, 65 and older, can benefit from staying independent and yet have coordinated congregate services that will delay institutionalization and in some cases ward it off entirely. It is not a housing program but more geared toward the provision of services. Right now, my own agency, has two sites. One is in Buffalo; the other is in rural New York State, in Springville which is a town located near the county line near Erie and Cattaraugus counties. I want to draw primarily from the Springville experience.

We exist in subsidized well elderly buildings, section 8 buildings. We maintain an assisted population of under 15 percent in these buildings. It is our responsibility to provide congregate supportive services which include meals. We provide the food, the shopping for three meals, at least one of which is prepared as a congregate meal. We provide homemaking services for daily living kinds of needs. We also provide personal care, social services, assistance with personal shopping, laundry, periodic heavy house cleaning, leisure time activities coordination of the central transportation and 24 hour emergency coverage.

As I mentioned our agency, the enriched housing program, serves people 65 and older who fit a definition of functional impairment, which means that there is something that precludes their participation or their living independently in the community. It is our responsibility to assess these people and to assist with the relocation.

Some of the sites have been developed with enriched housing in mind and in my own experience we have gone into existing elderly housing buildings and developed a program.

I think the thing that is most exciting to me about enriched housing that I want to share with you is some of the ways that our agency has been extremely cost effective in delivering really quality services to rural elderly. Currently, now we serve 20 clients and that may not sound like a whole lot of people. But what that has meant in terms of savings is our program cost is \$721 a month. That is the Level II-SSI rate. Out of that we give back a personal needs allowance of \$97 to each resident, which means that we keep \$624 to provide housing and services.

Because of the housing subsidies, the rent is about \$125 a month, that includes utilities. We pay for basic budget phone; approximately \$100 a month for food. Which means that we have \$386 a month for service and care to these people. That means that for less than \$13 a day, we are providing care.

There are two areas that I would like to draw on for comparison. About 70 percent of the people that we place had lived in the community and had personal care aids or homemakers who went to their own apartments or homes to do cooking, cleaning, and those kinds of tasks. In Buffalo, or in Erie County right now, the contract rate for that kind of service is \$6.26 an hour. Many of those people had required 4 hours of service a day and that would result in a cost of about \$700 per month per person.

That cost is borne right now by title XIX Medicaid. The Federal Government of course has a part in that. But let us just assume, and this has been my experience, that eight of those residents entered one of our congregate facilities. Bear in mind now that each of them only got 4 hours a day, while they lived in the community, and now they are going to have the whole gamut of services that I described. Instead of \$700 each for only 4 hours a day, which would be \$5,600 a month, for \$3,000 a month we are going to provide coordinated complete services. That is a savings of over \$30,000 a year from one eight person site. That can be multiplied ad infinitum throughout the county and throughout the State.

Since the Federal Government subsidizes in part Medicaid, of course the percentages differ according to the States. When that transaction occurs, and it very frequently does, New York State ends up subsidizing the Federal Government, because it is New York State that pays the Level II-SSI rate that covers our cost of care.

One of the other areas where we have experienced success, particularly in our Springville site, is in the placement of residents out of health care facilities. Four of the last placements that I have done at our Springville site have been people who have been in health related facilities, most of them for over a year; people who have rehabbed and come back into our program. Let us assume that the cost of their care was about \$2,200 a month. Even if we use our total cost, \$721 a month, there is a savings of over \$1,400 a month per resident. For the four residents in Springville that has meant an annual savings of \$72,000. So from placing 12 people, 8 in the community, 4 from a health related facility, we have been able, just in a very small program, to save \$100,000 a year from higher level of care, higher costs.

In conclusion, I would simply urge support of Federal Government dollars for enriched housing. We have been operating in our

agency since December 1979 with great success in these areas. I think with Federal intervention and funding, enriched housing might be looked at as an alternative to other States; particularly Appalachian rural areas.

I think that the other recommendation I would make would be that perhaps some kind of incentive for building developers could be created so that they would cooperate with the implementation of congregate care in their own projects.

Finally, I think maybe the development of a task force to study the needs and project cost savings on a much larger scale than my own narrow experience might be a very worthy task.

Thank you. That concludes my statement.

[The prepared statement of Ms. Kennedy follows:]

PREPARED STATEMENT OF SHERRY L. KENNEDY, PROGRAM DIRECTOR OF ENRICHED HOUSING, SUPPORTIVE SERVICES CORP., BUFFALO, NY

DEAR CONGRESSPERSONS: I am honored to be able to share with you my experiences and concerns regarding service provision for elderly as related to congregate care in rural settings.

I have been the Program Director of the Enriched Housing Program (which is sponsored by Supportive Services Corporation of Buffalo, New York) for nearly 4 years. We operate two sites: an urban setting in Buffalo and a rural setting in Springville, New York. My position involves much work directly with elderly clients around housing and service needs and spending a great deal of my time in the field assessing and assisting with placement of frail elderly persons. I have dealt with hundreds of individuals and successfully placed dozens of people 65 and older in the last 3 and 1/2 years. I believe I am uniquely qualified to share an important perspective on this topic.

Enriched Housing is a program developed by the New York State Department of Social Services in cooperation with the State Office for the Aging. Its purpose is to offer an alternative to institutionalization for frail elderly.

The Basic Features of the program are: Enriched Housing consists of small group shared living arrangements in which the residents are provided those supportive services they need in order to enable them to continue living in their communities with a maximum degree of independence, personal autonomy and privacy. Such services include assistance in housekeeping, shopping, meal preparation and personal care, with 24-hour on-call emergency coverage.

These innovative living arrangements may be located within ordinary private or publicly subsidized housing, including buildings for the well elderly. Various models are possible such as shared multi-bedroom apartments or combinations of individual dwelling units in close proximity to each other. In all cases, however, only a small percentage of the units in any one building or apartment complex may be devoted to enriched housing in order to preserve a non-institutional environment. Both of the two sites which we operate and which I direct are in well-elderly buildings, apartment complexes. Both are subsidized (HUD, Section 8). In the urban setting, we operate in 14.6% of the available building units; in the rural setting, 12.7% of the apartments are designated as Enriched Housing.

A private non-profit or public sponsoring agency is responsible for selecting the residents, securing suitable housing and providing the required services in conformance with requirements contained in the Enriched Housing Program Guidelines, published by the New York State Department of Social Services. These guidelines are being translated into regulations presently to be monitored by the Adult Services Division, who currently inspect and certify existing programs.

Target population

Participation in the program is limited to persons, aged 65 or older who have a degree of functional impairment which, in the absence of Enriched Housing congregate services, would preclude independent living, but which does not require continuous medical or nursing care nor full-time personal care. "Functional impairment" is defined as disabilities and health conditions associated with old age which prevent an individual from performing on a regular basis the normal activities of daily life necessary for independent living.

Funding

Eligible low-income residents of Enriched Housing receive an additional state supplement above the federal Supplemental Security Income (SSI) Benefit. (This is discussed more fully in the Section of this statement called "Information Sheet on Enriched Housing".) Previously, the same state benefit had been available to the impaired elderly—but only if they entered a home for the aged. This simple, but highly significant change enables low income persons to afford to pay for the services they need without being forced to enter an institution (often prematurely).

The current applicable monthly SSI benefit is \$751.00 (SSI income plus Social Security or other unearned income not counted by Social Security) per month for programs in the City of New York, Nassau, Suffolk and Westchester Counties; \$721.00 per month for programs in the remainder of the state. Of this total, a personal needs allowance of a least \$83.00 per month is returned to the residents. Residents pay program sponsors directly. In our own case, the personal needs allowance is \$97.00 monthly. The balance of \$624 is absorbed in rent, utilities, phone, food and services. The average "service" component of this figure is approximately \$386 per month. The balance covers somewhat fixed costs: rent, phone, utilities, food which would be present in any setting.

Services may also be secured by people not eligible for SSI who are able to pay privately. Roughly 25% of the residents statewide are private pay; locally, our program averages only 10-12% private pay.

INFORMATION SHEET ON THE ENRICHED HOUSING PROGRAM

Workers in the field of aging usually share a common ideal: to assist or create conditions enabling older persons to function at their greatest capacity—as independent, contributing members of the community. Supportive Services Corporation in Buffalo, New York is dedicated to providing cost-effective, high quality service delivery to elderly people. This is done primarily through the Enriched Housing Program. Supportive Services Corporation has sponsored Enriched Housing since its inception in December, 1979.

What is enriched housing?

Enriched Housing is a housing alternative of offering congregate supportive services designed to help some elderly people avoid unnecessary institutionalization. Clients selected for the program will receive a coordinated set of services to meet their individual needs while they remain in their own apartment. This unique program allows participants to share services, meals and social activities. Emphasis on fostering the independence, autonomy, and dignity of the older adult is inherent to the concept of Enriched Housing.

Where is enriched housing located?

Our program has capacity to serve 24 elderly persons at two different sites in Erie County. We operate an urban site in Buffalo and a rural site in Springville. Both sites are owned and operated by private developers with the program receiving no remuneration for operating within the buildings. (Some in-kind contributions are provided, however.) An agreement between building managers and program director governs program operation.

What kinds of people will the program serve?

Potential clients will be identified by Supportive Services Corporation staff in co-operation with the staff at the building projects. Presently, assessment is carried out by the Program Director of Enriched Housing. A separate list of requirements for accepting Enriched Housing residents is provided for the record.

How can clients benefit from the program?

The core service to be provided is case management. The significance of this is that a professional social worker will monitor major aspects of the client's well-being and strive to assume that essential needs are met while client independence is encouraged. A list of services provided is also attached for the record. Community resources will be tapped when they can enhance the quality of the client's life.

An added, and special feature of the Enriched Housing Program is the opportunity it affords to combat isolation and loneliness. This is particularly true of rural settings where independents is valued but geography works against socialization. While avoiding all overtones of institutionalization, the program facilitates group dining among residents and encourages group socialization.

How can enriched housing benefit the sites where the program is located?

Enriched Housing is an excellent opportunity for a business to publicly demonstrate its commitment to human services. It has been demonstrated that the program helps to alleviate one of the recurring and prevalent problems in housing projects: that is, how to handle the tenant who, when admitted to the project, was healthy and independent, but has since deteriorated. (The First Statewide Conference on Congregate Living stressed that most senior citizens' buildings, after five years in operation have 12 to 15% of senior in need or services.) Unfortunately, too many times a tenant who can no longer function autonomously is given only one alternative: institutionalization. By providing services that will allow the elderly resident of a housing project to remain in his/her own apartment, Enriched Housing is a middle level care alternative that prevents people from being placed in an institution when it is not warranted.

Costs for the home health and social work services provided to the clients are borne by the Enriched Housing Program. It is clear, however, that projects where the Program is located reap a variety of benefits. For instance, resident morale is improved as clients are helped. Public opinion of the housing project is enhanced as a result of efforts made to assist the elderly. Most importantly, persons enrolled in the program will receive the services they need without having to move and without placing any unnecessary burden on either the management or neighboring residents.

How is the program funded?

The two options for financing Enriched Housing are through private payment or through a special arrangement negotiated by the New York State Department of Social Services with Supplemental Security Income (SSI). Participants in the Enriched Housing Program who receive SSI have their monthly benefits increased to Congregate Level II funding (the rate is established and fixed throughout New York State). From this sum, which is managed by Supportive Services Corporation, client rent and utilities are paid; food and other supplies are bought; and the required supportive services (homemaker, personal care, cook, shopper, etc.) are purchased. Clients have a monthly stipend as an allowance for personal expenses and needs.

REQUIREMENTS FOR ACCEPTING ENRICHED HOUSING RESIDENTS

- 65 and over; or disabled and younger
- Mentally alert
- Ambulatory within their own apartments, although they may be wheelchair bound, or have a cane or walker
- Capable of self-feeding, medicating and bathing
- In need of assistance with such tasks as shopping, laundry, and meal preparation
- Free from serious mental or physical impairments which might threaten the safety or well-being of other residents (i.e. drug or alcohol abuse)
- Does not require 24 hour supervision
- Client may be ruled out if their personality would seem to be disruptive to the harmony among clients; or if client is unable to purchase services through SSI or private payment; or if client is unwilling to allow the corporation to manage his/her checks; or if the manager of the housing project is opposed to client's admission.

GENERAL INFORMATION AND LIST OF SERVICES PROVIDED BY ENRICHED HOUSING

The following services must be made available to Enriched Housing participants: (1) Meals (food for three meals, at least one daily prepared as congregate); (2) home-making (for ADL tasks); (3) personal care; (4) social services; (5) assistance with personal shopping; (6) laundry; (7) heavy housecleaning; (8) leisure time activities; (9) coordination of essential transportation; (10) 24 hour emergency coverage.

Enriched Housing was developed in New York State in the mid 1970's with the goal of de-institutionalization through congregate housing, non-medical services. It is not a housing program but its focus is rather on services provision. Enriched Housing clusters persons who need supportive services and provides the delivery mechanism. Average costs of service component of Enriched Housing \$12-\$14 per day (for Supportive Services Corp. program).

There are presently 20+ sponsors in New York State. Much of program design depends on the needs of the clients served.

The average age of the Enriched Housing residents is approximately 78-80.

There is 3:1 ratio of women to men.

Hundreds of thousands of dollars are saved yearly due to the Enriched Housing Program (difference in institutional care costs). I will attempt to document some of the ways Enriched Housing saves the state and federal government money and to demonstrate our cost-effectiveness. That the greater level of independence is more desirable and the quality of care is a given, I will focus on financial aspects of the program.

FINANCIAL CONSIDERATIONS ON CONGREGATE CARE—A DEMONSTRATION OF COST-EFFECTIVE SERVICE DELIVERY—ONE AGENCY'S EXPERIENCE

Our congregate care program presently serves 20 clients in 2 sites. Buffalo (an urban setting) and Springville (a rural setting). Referrals for care come from building managers, outside elderly service agencies, hospital and nursing home discharge planners and social workers. The total cost of our program is \$721.00 per month. Of this, a personal needs allowance of \$97.00 is returned in cash to each client. This leaves the program with \$624.00 monthly to provide housing and services. A certain amount of the cost is readily absorbed by housing and board. The average rent is \$125.00 per month (all program participants qualify and receive subsidy). (This average also includes utilities which are included in the rent at one site and not at the other: \$13.00 for phone; \$100.00 for food. This part of the expense amounts to: \$238 per month which if we subtract from the initial payment of \$624 leaves \$386.00 per month for the service or care providing component of the program. This means that our daily rate for care is less than \$13.00 on the average.)

Let's do some comparisons. Those individuals entering the program either from the community—or living in the building and entering the program generally have already a Home-health aide who comes to their home to assist them. (This is true for roughly 70% of the persons placed.) Let's assume that the average individual had an aide for 4 hours per day. This would total 28 hours weekly or 112 hours monthly. The present rate in Erie County for contractors who provide health aides is \$6.26 per hour. To have an aide for 4 hours a day, each individual creates a cost of over \$700.00 per month. This cost is borne by Title XIX—medicaid—a portion of which originates with the Federal government.

Let's assume that we have 8 such residents in one congregate facility. Individually, each received 4 hours daily of service (this had to include any shopping, meals or other tasks needed; each lived alone with little or no interaction with others; each paid his/her own rent, utilities, etc. each had no one essentially to coordinate the care and services s/he received before entering the program. Also, each cost Medicaid \$700 per month for only 4 hours daily of care. (The total bill to Medicaid would be \$5600 per month.) With the congregate care of Enriched Housing, the cost of each is \$386.00 per month—or a total for the 8 residents of \$3088.00—an immediate savings of \$2512 per month or over \$30,000 per year from 1 eight-person site. This can be multiplied 'ad infinitum' throughout the state and country. (Also, recognize the non-monetary benefits of more care, better quality of life, coordination of services, socialization, etc.)

Since the Federal government subsidizes MEDICAID to some extent at differing percentages per state, actually when this transaction outlined above occurs, New York State subsidizes the Federal government. New York Level II SSI supplement now covers the care medicaid once provided. Hence, the involvement and support of the Federal government in congregate care is becoming increasingly important and essential!

Another area where New York State through the congregate Enriched Housing Program picks up care and saves millions of dollars is through the placement of nursing home patients. At the Springville site, for example, 4 of the 8 residents had been institutionalized in health care facilities at an approximate cost of \$1900-\$2400 per month—let's average at \$2200 monthly. Medicare and Medicaid again bear this cost. Even using the total rate for Enriched Housing \$721—there is a savings of \$1429.00 per client per month.

In one site with 4 such residents, the monthly savings is almost \$6,000 or an annual savings of \$72,000—from providing congregate services to only 4 persons. Thus, not only does Enriched Housing reduce the rate or delay-institutionalization, but often provides an alternative to those presently so placed.

Another consideration or benefit of congregate care is that in the event of hospitalization with DRG's and pressure to send patients home quickly, having a supportive service network in place can facilitate this, against saving hundreds of thousands of dollars.

Finally, not only does such care save huge sums of money, but the quality of service and care far exceeds that of many other, more expensive systems.

Recommendations for future intervention of Federal Government in providing congregate care:

1. I would hope that the cost-effectiveness and quality of congregate care would attract Federal government involvement. One of the direct ways this could benefit Enriched Housing and New York State would be if the Federal government would pick up the Level II SSI supplement now borne by New York State.

2. With federal intervention and funding, the programs such as Enriched Housing could be expanded throughout the U.S. with the savings in higher levels of care multiplied proportionately. The need for such service is obvious, particularly in rural and Appalachian areas.

3. I would like to see some kind of incentive for building developers who would cooperate with the implementation of such congregate care in their projects.

4. I would appreciate the development of a task force to study the needs and project cost savings on a much larger scale than I've been able to offer here.

Mr. BONKER. Thank you, Ms. Kennedy. I appreciate all the panelists statements and your official comments will be placed into the record. You have allowed us some more time for questions.

Ms. Cliver, I would like to ask you about the Mayville project known as Portage Hall—

Ms. CLIVER. Portage Hill.

Mr. BONKER. Portage Hill rather. The Administration on Aging for its part was to provide in the 3 year program, funds for services including partial meals, transportation, housekeeping, personal services, social and recreational activities and so forth. A range of services. The idea was to nurture and sustain the life styles for older persons who are residents there. And now after 3 years, it terminated in 1983?

Ms. CLIVER. Yes. We were able to keep it going a little bit longer because of some of the contribution money.

Mr. BONKER. So you were able to extend it. But, number one, how do you explain to the residents who were benefiting from these services that all of a sudden the services were going to be phased out, like the kitchen, prepared meals and the like. Was there some surprise on their part that all of a sudden these services were no longer to be continued or did they fully expect the program to last only 3 years and that at some time it would come to a halt? And number two, what kind of burden does this place upon your agency once you have committed yourself to providing so many services, without specific funding to continue them, and that all of a sudden they look to you to extend the program?

Mr. CLIVER. This was a project that I inherited, and it was kind of fun to come in on it. We do still provide some services as we would to any elderly person. We do provide shopping assistance and to those that need homemakers, we provide some homemaker service. Social services comes in with some personal care. We still provide the homemaker who helps make the breakfast if people come in and share on the cost of the breakfast. We did have to take away the weekend meals but we are still providing five meals for the nutrition site.

It is very difficult to explain to residents. We had to just recently talk with them about our decision to not have onsite cooking. That was one of the toughest decisions I think that we had to make in our office.

However, I guess as in charge of the whole county, we have to look at the whole county as a unit and see how our funds are going and provide for the whole county.

I think there is definitely a sadness in any project when moneys are not there for the whole time and people come in and expect to live there, thinking that things are going to be one way. I am not sure what residents were told. Some residents say that they knew it was only a 3-year project. Some residents did not know. I am not sure exactly how that was handled. I was not on board. But it was a demonstration project. It is a tough thing I think to have something and then change. I think that is a huge sadness I have in being connected with the program.

We have tried to the best of our ability to still provide certain things for Portage Hill, but only to the extent that we would provide to any senior citizens. We have to care for all senior citizens. I think it is difficult to have people move in expecting that these services will last longer and that they are not able to last longer, and that has been tough for us too.

We did attempt to work with the project director, when the money for him ran out. We had a need for a focal point person, which is a service that we provide in the county. We have four focal points. And instead of having the person working out of our office, we had the person work out of the Portage Hill facility. But I believe that part of our problem was that the person we have is definitely an advocate for senior citizens and in that sense aggravated the ownership who did not want him to stay there. We had no choice, since there was not the contract or anything any more but to have him moved out.

We as an office for the aging have tried to do the best we can and have been sensitive to the needs of Portage Hill. Although this decision that we have had to make for the weekend meals is a sad one and I know that residents are unhappy with it, but we have to look at the nutrition value being the same for the meals. The taste is not there. You compare a home cooked meal with a catered transported meal and there is a difference. The nutrition value is still there, so we have to look at that as we are looking at our funds.

Mr. BONKER. Mr. Lundine?

Mr. LUNDINE. Well, I have got to say that this is about the third sad day; Mrs. Haggerty has probably had a lot of sad days; but it is about the third sad day for me. The first was when my assistant Pat Kinney told me about the developments at Portage Hill; the second was when my wife visited it and came back home and told me in no uncertain terms about the development of problems there; and today is the third.

Because I sponsored the national demonstration project and I supported, as you probably know, although it predates Sandy Cliver's being in her position, the construction of Portage Hill, it was my understanding that the purpose of a demonstration was to see if something worked, and if it worked it would be continued. So it is not just the residents that had a misunderstanding, if to the extent they did, it is even somebody who was there at the start of it.

I would like to though ask you a few questions about it. Was there any evaluation done by anyone at the end of the 3-year period as to whether this congregate services endeavor had been a success or not?

Ms. CLIVER. Well, we had written our report and we have got copies for you. I think that the idea of congregate housing is definitely a good idea. It had been looked at before and my report I used was part of what Ron Vieklos had prepared and enriched housing had been looked at and evidently felt that it was not right for Portage Hill. However, I have been investigating it more to see if it is a possibility that we could switch it over and have enriched housing there.

Mr. LUNDINE. Basically though, you would say the evaluation is that it was successful?

Ms. CLIVER. I think the project was successful. I think probably the major problem is not having the funding to continue at the level that it was. I think something that was unsuccessful was the confusion of management. We were, you know, by us paying a project director and not having that be paid by the management corporation, I think that was a confusion.

Mr. LUNDINE. It would be better if a management corporation or some central authority had that responsibility?

Ms. CLIVER. Yes. There were two leaders I think in that sense. Management had some frustrations with people going to the project director rather than going to management. However, our project director was right onsite and could handle problems.

Mr. LUNDINE. There is a need in a project like this for a project director?

Ms. CLIVER. Onsite management I think.

Mr. LUNDINE. That also provides onsite management, that is what you are saying?

Ms. CLIVER. I think there is a need for onsite management.

Mr. LUNDINE. Did you apply for any continuation of the funding of it or was there any possibility of vying for continuation of that?

Ms. CLIVER. I do not know that in particular because it had run out right about the time that I came on board.

Mr. LUNDINE. Oh, I see. You basically took over after the termination of the demonstration period?

Ms. CLIVER. Yes. I got all the fun parts.

Mr. LUNDINE. Yes.

Ms. CLIVER. If you know of anything, we are willing to work in any way that we can, if you know of anything.

Mr. LUNDINE. No, I am just trying to learn.

Ms. CLIVER. OK.

Mr. LUNDINE. You have done a remarkable job with what you have had I think. And I believe—I am not trying to speak for any of the residents, but I believe everybody understands that. These questions are not trying to suggest anything otherwise.

Ms. CLIVER. Well, I was saying if you knew something I would be glad to work with you on it.

Mr. LUNDINE. Basically what you are saying though is that while you strongly support nutrition programs, that it does not work just to put a nutrition, a Conventional Nutrition Program as we understand them, under the office for the aging, into a congregate site?

Ms. CLIVER. I think it would work if it were done at the beginning. What we do now with most of our nutrition sites, is we have meals that are prepared by the Jamestown High School system and then are transported throughout the county. We are able to get

those meals at a very reasonable price by doing that, even though we transport them.

However, when you have onsite cooking and you attempt to have catered meals, people are used to onsite cooking and there is a noticeable difference. However, at our Herbert Star Apartments, we have a nutrition site in operation there. And Herbert Star Apartments in Brockton were just opened about 1 year ago, and we put a nutrition site in there and most of the residents come and eat the same meals. The reports that we receive are that the meals are good. However, if you have had something better and then you have it taken away, there is definitely a difference. I prefer the Saturday and Sunday meals. I have been there to eat them and definitely I prefer them.

I see that it is working in Herbert Star Apartments to have the nutrition program located there. I would not say that having a nutrition site in a housing complex is a bad idea; I think that is a good idea. When we have it there, we have other people that come in also. It is open to the public, it is not just for the congregate housing residents. In order for us to have it, we have to have it open to the public.

Mr. LUNDINE. I have questions with other witnesses but maybe you want me to turn it back to you.

Mr. BONKER. Why do you not proceed?

Mr. LUNDINE. Ms. Boon, can you give me an example of how shared housing works here in Chautauqua County? I mean give me a practical example.

Ms. BOON. A practical example of shared housing would be—to my knowledge there is no organized shared housing right now. The interest is there. We have determined that. But as I said in my testimony, it is very labor intensive. What it involves is, determining a resident. Let us say a homeowner, an elderly homeowner, who has a home that they would wish to hold onto. It is old, it is big. It is underutilized. They can choose to take in another elderly person and share space, some common spaces and then there would be private living spaces for each family unit. Or they could take in a family. And, again, there is a common cooking area and then there would be private living areas for each individual unit and a sharing of the expenses and whatever they would agree to share, with respect to maintenance. In this area, snow removal, et cetera.

When you put two units that are not related into a common facility, you automatically have to have some type of means of counseling if that is what you care to call it, meshing it together, bringing them together. There is going to be conflict. And if we as an agency are instrumental in bringing those parties together, we as an agency are the people that they are going to come to when there is a conflict. There is going to be a period of adjustment. No matter what you do there will be a period of adjustment and that is where the time becomes involved. There is no remuneration back for doing that.

Mr. LUNDINE. So you are saying because of the lack of administrative funding COI has actually not been able to implement this type of a program?

Ms. BOON. That is accurate.

Mr. LUNDINE. I must say that I have been fairly active in the housing subcommittee as well as this subcommittee for some time and this idea of enriched housing is new to me. I may have read about it but I do not have any practical experience with it. It is very interesting. And I was not quite sure, your funding comes from title XIX?

Ms. BOON. No. Our funding is a New York State supplement to SSI, supplemental security income. Whatever the person has in the community, \$400 social security; New York State will make up the difference between that and our present rate, which is established by the State, 721. Those two sums together would come to us as payment for the program.

Mr. LUNDINE. Then you in turn, as you testified and as I understood it, you get the individual beneficiary so much for their own needs and so on?

Ms. BOON. Right. We return a personal needs allowance of \$97 a month. That will just simply go for postage, those kind of personal things. We provide the necessities for the home, food; we take care of the rent and utilities and provide basic budget phone.

Mr. LUNDINE. So you are like a financial manager for elderly people?

Ms. BOON. Yes, we do the management as well.

Mr. LUNDINE. I cannot remember the number of people you said you were serving.

Ms. BOON. Twenty.

Mr. LUNDINE. Twenty?

Ms. BOON. Yes.

Mr. LUNDINE. With a staff of how many working for those 20 people?

Ms. BOON. I am fulltime program director. I have a fulltime assistant who functions as a case manager. And we have, in Springville, we have two staff people, a full-time and a part-time person; at our Buffalo site, because it is the larger of the two, we have four part-time people; for a total of 80 hours.

Mr. LUNDINE. This is a question for both you and Sandy Cliver. Is the lack of numbers of units or people that you are dealing with in Springville and Mayville a problem? Is it inefficient?

Ms. CLIVER. Is the reason for not being able to do some of the things that we would like to do because we do not have enough people?

Mr. LUNDINE. Right. Is 30 an insufficient number? Is the number you have in Springville insufficient to effectively provide that kind of service?

Ms. CLIVER. No, it would be more funds.

Mr. LUNDINE. I know you need more funds.

Ms. CLIVER. Go back to Congress and get us more money.

Ms. BOON. For us it is not a question. Eight seems to be a real workable number. That justifies the staffing that we need to do quality work. The State has limited in a site 15 percent. In Springville, in the building where we operate, are 63 units. So we are just about at what we would be able to negotiate and to serve there. For me I think more than that would be creating an institution in an institution. And part of the mainstreaming effect, part of the socialization part of the mix with well elderly and our frail elderly

people whom we are serving, I think it is one of the benefits of having the program and of keeping it at a manageable level.

In Buffalo we have twelve units in a building. There are over 75 units in the building. And that—there again you are needing more staffing, the meal is more difficult. We serve a family meal as well. It is onsite cooking.

Mr. LUNDINE. These are all section 8 projects?

Ms. BOON. Right.

Mr. LUNDINE. Why is this only good in a section 8 project?

Ms. BOON. It is not. That is just my own experience. Theoretically, we could buy a building, renovate it and provide enriched housing. There are some of the programs in New York State that have done that. We have not explored that as a route yet.

Mr. LUNDINE. Thank you.

Mr. BONKER. Ms. Cliver, just one additional question and then we will move to Ms. Hasard. For senior citizens who can no longer manage for themselves in an independent residence maybe, traditionally their home, the committee is looking at the alternatives available. If they are unable to care for themselves, provide for meals and so forth and they are denied transportation, maybe their children do not live in the area; and they are located especially in a rural area and we do not have congregate housing where those attended services are provided; are there any alternatives to a nursing home? And if that person's financial resources are depleted by paying whatever a nursing home is today, \$1,500 to maybe \$3,000 a month to get into a skilled nursing home, at least that which qualifies for Medicare, but I know we are talking about Medicaid in this instance; are we not only precipitating or at least promoting their transition directly to a nursing home, which makes them more dependent instead of less dependent?

Ms. CLIVER. By not having an alternative—

Mr. BONKER. By not having an alternative. If the Federal Government is really anxious to save money, what kind of savings do we achieve if we prematurely commit them to institutionalized care where we are going to pay \$2,000 a month or whatever, versus the person maybe being able to manage on their limited income in a congregate housing like Portage Hill?

Ms. CLIVER. I can see where congregate housing is helpful for the transitional time. We do, within the county, provide services in home to help a person stay at home.

Mr. BONKER. Well how expensive is that though? If my father did not have financial security and he were living pretty much on a meager retirement check plus Social Security, he could make it in a congregate facility without any subsidy from income security funds. He would not have to be a drain upon some of the traditional programs. I just do not see any alternative to his inevitable commitment to the kind of nursing home that is very costly.

Ms. CLIVER. Within the congregate though you do not have the 24-hour care. That is not—

Mr. BONKER. But a lot of people do not need 24-hour care.

Ms. CLIVER. Yes. Put the homemaker or that type—

Mr. BONKER. They do not have transportation and they need good meals, pretty basic.

Ms. CLIVER. At the present time with our facility in Portage Hill we do have homemakers within the facility for those that are in need of them. We do have meals that are served five times a week and then the breakfast, which they can help contribute to. So the concept of congregate housing is still there.

Mr. BONKER. It is still there.

Ms. CLIVER. To a certain degree. Actually, if you look at onsite cooking or our catered meals, the nutrition value is still there. So a person is going to survive at the same rate.

Mr. BONKER. You need both things. You need the money, or at least the program, to build and operate the facility. Then you need the services. Which is why this program, this demonstration project that Stan Lundine has promoted in the Congress, was so ideal. But it apparently is just going to disappear.

Ms. CLIVER. You mean for future programs to happen?

Mr. BONKER. Yes.

Ms. CLIVER. I think that we have managed to keep services there to some degree that used to be there at—

Mr. BONKER. Well I think you are making a great effort. But residents like Ms. Haggerty, are not terribly satisfied with the reduced services.

Ms. CLIVER. Well, I think the biggest—I think Ms. Haggerty may speak for herself, too, but I think the biggest problem is the onsite versus the catered meals.

Ms. HAGGERTY. Thank you. It seems to me rather ridiculous when we have a very, very well equipped kitchen and not use it except for breakfast. Check with somebody else, because I do not eat breakfast there usually because breakfast is very simple to get, but most people have got a simple breakfast. Somebody told me today that not very many people eat breakfast there during the week. More eat there on the weekends because it is served later and is more of a brunch type. There will not be any breakfast on the weekends now, beginning February 1, as well as no dinners during the weekend. And breakfast is sort of a simple thing to get, while dinner is harder. Some of the people who are not well, if they do not feel well, they tell the lady in the kitchen and she sees that their dinner is brought right to their apartment so they do not have to go down the hall to eat. It seems to me when we have all those facilities, it seems ridiculous not to use them.

Mr. BONKER. Ms. Cliver said that it is cheaper to cater than it is to have onsite preparation. Why is that so? Just volume?

Ms. CLIVER. Because of doing it in a big amount. We contract with Chautauqua Opportunities who in turn contracts with the Jamestown school system and they are able to provide our meals.

Mr. BONKER. Oh, it is the school system that does it.

Ms. CLIVER. Yes. They are able to provide our meals at \$2 and 4½ cents, plus 30 cents transportation. It is a dollar and cent figure. Ms. Haggerty did mention to me on our way down about the weekend breakfasts. We may be able to juggle that around so that the breakfast would be—what we can afford to provide is 5 days a week. And if there is a preference for the weekend, we may be able to switch to weekend for the breakfasts. There is the meals-on-wheels service, too, which is provided for the congregate site as

well as through the rest of the county if people are actually in need of it.

It is a shame to waste a beautiful kitchen. I have talked with the ownership of the complex to see—they are not allowing the tenants in the kitchen at this particular point. They are locking it at night.

Mr. BONKER. Cannot even go in and have ice cream.

Ms. CLIVER. Pardon? They put a stove and a refrigerator outside of the kitchen. I have talked with them about the possibility of setting up some regulations where maybe just the tenant counsel's president could have the key and then they could use the kitchen and for their potlucks and whatever. I have also asked them, Mayville Partnership, whether on the weekends, which the tenants would be very happy to chip in and pay something if they could not continue to have weekend meals, by working out their own arrangement.

Mr. BONKER. That is President Reagan's hope of volunteerism. You can volunteer to cook your own meal on weekends.

Ms. CLIVER. Well, even that they were willing to pay and have people come in. It is up to the ownership whether they will allow that to happen. I have talked with the owner in Buffalo, or the manager, and she is talking to the owners to see if that is possible.

Mr. BONKER. Is this project now at capacity? I mean is every unit filled?

Ms. CLIVER. To my knowledge it is. There is a waiting list.

Mr. BONKER. There is a waiting list?

Ms. CLIVER. There is a waiting list and I know of one lady that had wanted to get in and she was told that it would be about 2 years before—they felt that it would be 2 years.

Mr. BONKER. There must be quite a need out there. To build more units.

Ms. CLIVER. The Herbert Star apartments have three vacancies at the present time. I think one is about to be filled. They have had trouble filling their's in Brockton. But they are not as close to a grocery store. And they had built some of the one room efficiencies which are not going quite as quickly as the others. People are not willing to go into that.

Mr. BONKER. I think we better get to Ms. Hasard, who was late today.

Ms. HASARD. I am always late.

Mr. BONKER. Mr. Lundine tells me you will probably have a good excuse.

Kryn Hasard is the director of the Rural Aging Services Program, Neighborhood Preservation Corp., Ellicottville. We are pleased to have you, even though you are late, and anxious to hear what you have to say about this program.

STATEMENT OF KRYN HASARD, DIRECTOR, RURAL AGING SERVICES PROGRAM (RASP), NEIGHBORHOOD PRESERVATION CORPORATION, ELLICOTTVILLE, NY

Ms. HASARD. If you are speaking of congregate services, housing with services, I am very much in favor of that. I have quite a few statistics regarding the elderly. And my program deals with senior

citizens age 62 and older. Although we take care of those people that fall through the cracks also.

Right now my corporation has a Farmers Home 515---

Mr. BONKER. Is your corporation private, nonprofit?

Ms. HASARD. The Neighborhood Preservation Corp. is a nonprofit, yes.

Mr. BONKER. Private and nonprofit.

Ms. HASARD. Private contract is with the State.

Mr. BONKER. And you are on a contract with the State.

Ms. HASARD. Right.

Mr. BONKER. Is that Ms. Kennedy's department or some other department in the State?

Ms. HASARD. No. We deal with the division of housing and community renewal.

Mr. BONKER. OK.

Ms. HASARD. Now my program with the Rural Aging Services Program is a different grant under this Rural Preservation Corp. and it has the state Office for the Aging and the Division of Housing and Community Renewal coming together. The Division of Housing and Community Renewal funds it, but the work is supervised and encouraged, and the models come from the state Office for the Aging.

I deal with the elderly in housing problems. My job is that of a housing brokerage. I try to provide housing, take care of housing problems, housing repairs, rehabilitation, renovation, and at the same time help coordinate services in the county. The agencies, private programs, volunteer programs, sheriff's department, Office of the Aging, you name it.

And then also I help move people into these elderly housing programs that we have. We have one 40 unit; we have a 24 unit going up in Delevan which is about 30 miles north in Cattaraugus County and another one going in Randolph, which is on the border really of Chautauqua and Cattaraugus Counties.

Mr. BONKER. Do you mean housing projects for elderly?

Ms. HASARD. For elderly, well elderly.

Mr. BONKER. Well elderly.

Ms. HASARD. Right.

Mr. BONKER. OK, would you give us an idea of how you deal with congregate services in your facilities?

Ms. HASARD. Well, we would like an enriched program. But our corporation is pretty well understaffed.

Mr. BONKER. Like Stan Lundine, I have been involved in housing issues. But would you tell me about the enriched program?

Ms. HASARD. The enriched program is the program that Ms. Kennedy deals with, that she has. It is for frail elderly.

Our program, the Farmers Home 515, is equivalent but better than the section 202 from HUD. It is for well elderly and really there are no services. You have an apartment, there is a community room, we have a refrigerator and stove. But you take care of everything yourself.

Mr. BONKER. There is no onsite kitchen and meals?

Ms. HASARD. No. Just in the community room there is a small kitchen for parties or for get togethers or things like that.

Mr. BONKER. But not regular meals?

Ms. HASARD. No. I tried to coordinate that on my own through the RASP Program. There is Meals on Wheels. There are ECHO sites in our county. In fact the church down the street from the Housing Program has meals at noon. We can get them down there.

Mr. BONKER. So it is like an apartment complex.

Ms. HASARD. That is exactly what it is. But they get the—

Mr. BONKER. But you are on contract with the State, so these units are more or less subsidized?

Ms. HASARD. Our units are subsidized by the Division of Housing and Community Renewal.

Mr. BONKER. So what is the average per unit?

Ms. HASARD. The rents start at \$250. With the subsidies they go on down from that. We have one man paying \$17 a month. Besides the subsidy, there is also a \$79 a month utility allowance across the board. We have 35 subsidized units out of the 40 that we have there. In Randolph, for example, we have 24 units and we have 22 subsidized.

To get back to my statistics with the elderly and what I am seeing, originally I was to deal with strictly home repairs and finding money for these people. The low-income elderly are maintaining their level of poverty. They are so used to doing without that I can keep them going. Although their housing is deplorable out in the country. The middle class are losing ground rapidly. The outlook is very bleak. They go from owning their own home, which in our county is a very severe problem. It is a buyer's market. Cattaraugus County has a deficit, taxes are going up. The villages and towns are not able to—

Mr. BONKER. Excuse me, when you say "losing their own homes," it seems to me if a family has owned a home for a lifetime or has developed the equity over a lifetime, that they could sell that house with a substantial profit and invest the money and make themselves fairly independent.

Ms. HASARD. Well, let me put it this way—

Mr. BONKER. I do not understand what you are saying when you say they lose their homes.

Ms. HASARD. All right, they lose their home. What they eventually do is get out, many of them, and let the county take it.

Mr. BONKER. You mean they do not sell them?

Ms. HASARD. Where I live in Franklinville, a small village, a house with four bedrooms, a beautiful house, all natural cherry and maple can sell for as low as \$20,000. Sometimes they go for \$15,000.

Mr. BONKER. Well, a home like that in the District of Columbia would run around \$300,000.

Ms. HASARD. We have got four children so we have five bedrooms. It is a very nice house, in a quiet village, it has got quite a bit of land and we will be lucky if we can sell it for \$25,000.

Mr. BONKER. That is amazing.

Ms. HASARD. Well, it is a buyer's market. If you were wealthy you could buy up land in Cattaraugus County for very low prices. But it is a buyer's market. They cannot sell. There is no industry in Cattaraugus County.

All right, so then you have all the towns and villages losing their liability insurance. That is a big problem. It has gone up 200, 400 percent and in some cases they have lost it.

They do not know what to do, so some of them are starting to raise taxes. Then also because our village is quite old, some of the villages do not have sewer system. For example, Franklinville's sewer system, was a model sewer system in 1920. It needs a new one badly. The ground water is up leaking through. So the elderly people on fixed income, not only are their taxes being raised county wide, property taxes, even with the IT 214, which is a tax rebate elderly people can get at a certain income level also, they now are going to have to pay for hookup. Their water bill will triple, quadruple, to in some cases it is \$55 every three months, you have to pay it quarterly. Right now in Franklinville we are paying like \$40 once a year. Now that is going to go up.

When Little Valley, which is another little village in our county, had their water line put in it cost them anywhere between \$300 and \$400 they are estimating for hookup. In Franklinville it is going to cost \$800. Where are the elderly people going to get this money on a fixed income? My average client earns \$5,000 a year. Now my clients all worked and they were strong middle class. Inflation has eaten away their savings, so they are moving out of their houses. Some of the people that have moved into our apartments have lost their houses to the county, and they were the backbone of America 20, 30, 40 years ago.

And so that is my concern. My concern is that people realize what the elderly are up against. Another thing that I will hit at is the telephone. I am trying to gain composure because the telephone is one of the biggest problems. In our area it is becoming a luxury. An absolute luxury. The people that moved into our apartments, and we just started renting up—we have been renting up for a while but they started moving in 2 weeks ago, in the middle of a snow storm, it was lovely; and our contractor paid for all the wiring. The telephone company did all the wiring to the buildings. Then the contractor paid what he had to. Then all the wiring inside the buildings in the apartment, we put the interfacing on, it was done according to the telephone company regulations. Each one of our elderly to have a telephone and to have the dial tone established paid \$86 minimum.

It is ridiculous.

Mr. BONKER. It is all the result of the breakup.

Ms. HASARD. Yes. It is a fiasco. They do not understand their bills. We do have people that when we are getting them into safe, decent housing, what is available in our country, have heart attacks, and they will actually die through the stress.

I have been running back and forth for the last two weeks with the telephone company. It is incredible. We finally just took the responsibility away from them and handled it out of the office completely. Also the utility bills are going up. We have a public service commission that does very little to nothing as far as I am concerned.

[See appendix, p. 47 for additional material submitted by Ms. Hasard]

Mr. BONKER. This committee has devoted considerable time to that issue, the impact of telephone deregulation on elderly citizens. Especially those in rural areas.

Ms. HASARD. Our calling area is very slight. It's usually around anywhere from 12 to 18 miles. So anything out of that is a toll call. It is very difficult. The telephone is a lifeline for them.

Mr. BONKER. Absolutely.

Ms. HASARD. They must have the telephone. I have quite a few that do not. Now we are coordinating services within our Farmers Home 515 through the RASP Program. But the problem with volunteers is every program now has to have volunteers. They are pushing volunteers down our throats. Which is delightful but they are not reliable. Since you do not hire them, you cannot fire them. So when they do not show up, they are a volunteer. There are some good programs through the RASP Program. We were instrumental in helping start the Interfaith Volunteer Caregivers Program which does work. It is funded through the Robert Wood Johnson Foundation. But it is difficult. The turnover is fantastic.

So getting back to the elderly, they need congregate housing, they do need home repair programs. They need money available for that, because not everybody wants to move into a housing project nor is it feasible.

We do like working with the Farmers Home Administration. We would hate to see HUD take it over.

Since I have not dealt with HUD directly but only Farmers Home, I had to really investigate those people that deal with HUD and the section 202. And compared with Farmers Home, and no bureaucracy is perfect, Farmers Home is flexible, it is adaptable, it is accessible. They are local people, they know the problems, especially rural problems. HUD financed two elderly senior citizens housing projects in New York State last year, one in Alfred and one in Marion. Farmers Home funded a great many. Housing need is critical, absolutely critical in Cattaraugus County. Waiting lists are 3 to 5 years. We have people calling us from out of State, Tennessee, all over the place now, Florida, to come back into Cattaraugus County to live there until they die. That is a very big problem.

We enjoy working with the Farmers Home Program. When I investigated HUD and those that deal with HUD, in comparison they see it as extremely inaccessible, ponderous bureaucratic machine. The housing division, from what I understand, is administered mostly out of Washington, DC; where with Farmers Home we have local offices, district offices, all over wherever you are going to build. And they understand the problems and they will help you. We have been able to open housing programs early because I had people that had nowhere to live. They have been very helpful indeed. They are not perfect, but they are good to deal with and I would hate to see the housing programs all go into HUD I think we would lose a lot. I think we, the rural areas, already lose so much in New York State to New York City. Our suffering that the elderly people have in the rural areas is not seen. It is not seen by the everyday person.

Mr. BONKER. Well, thank you very much. For your information and those who might be interested, the subcommittee has published a booklet or a little pamphlet on "Five Ways to Cut Your

Phone Costs." It is oriented towards senior citizens who try and understand the breakup and how they can cope with it.

We have sent out a lot of these pamphlets. If you get in touch with Mike Rodgers after the hearing, we can give you some of those pamphlets for distribution. It does not solve the problems but you have a better understanding of what is happening.

And I would also like to add that for those who traditionally have relied on Federal programs and expenditures, both Stan Lundine and I and our colleagues are going to have to deal with the harsh realities and the very difficult choices that are coming as soon as next month when Gramm-Rudman's first installment will go into effect. That will represent in the first stage, which is a nibble, of \$11.7 billion in reductions. That will represent about 3.5- to 5-percent reductions applied in each of the assisted housing budget items contained in fiscal 1986. For fiscal 1987 it may be as high as \$60 billion. So you can multiply those cuts, and then in 1988 expect another sizeable chunk. It will probably all but devastate many of these programs, unless Congress and the President get together and find an alternative method for achieving our deficit reduction goals.

I do not mean to say that to startle you, but only to better equip you to plan for the future. Unless we reverse what appears to be an unalterable course of deficit reduction on virtually everything, in defense and nondefense spending, except those which have been exempted by way of the democratic alternative which was eventually adopted, everybody including our offices will have to absorb these cuts.

Mr. Lundine?

Mr. LUNDINE. Well, I was just going to ask one question because of the time situation. There is a report on congregate services done by the International Center for Social Gerontology that suggests that the way to deal with this problem is that you could find developers who would join forces with their agencies such as yours here and volunteers and there would be no problem, you would not need funding to—any separate funding to support congregate services.

Ms. HASARD, since you were the last to speak, do you believe that that is so?

Ms. HASARD. No, I do not. I do not for many reasons. People are living longer these days. And maybe that is one reason that conditions so deteriorate. With the breakup of the family and in rural areas, you have a child supporting their grandparents and their parents. We have trouble with volunteers. Both—almost in all families the men and women are working, mothers and fathers. They have limited time. We are a poor county. We are a rural county. Our cost of living is high. There is no public transportation. You have to use your own car. You have to go out of your way. Not that most people will not help, they still do in the country. Most people do help. In many areas you still do not lock your houses when you go away. There is that type of thing that does go on, but we are running out of volunteers. And as I said before, too many people work. They have to to maintain a decent standard of living. We do use volunteers when we can. They are the retired volunteer persons and this type of thing. We still cannot get enough of them. As I say, the turnover is great. We have very harsh winter weather.

And you have to maintain your own automobile, and that is a big problem right then. To get services to many of these elderly people is very difficult, especially those that are not moved into elderly apartment houses where they are congregated together. You have all kinds of insurance problems, people are scared. You know, the accidents in the winter are common. Our winters are harsh and long. No, that is not a viable solution.

Mr. LUNDINE. Mr. Chairman, I smiled some time ago because I recalled that several years ago Senator Aiken of Vermont said that we should declare we won the Vietnam war and go home. Much in the same way it strikes me that the Federal Government undertook a demonstration program in congregate services, declared that they had found a very good answer, closed it down and went home. I am not sure that that is doing a great public service, but that appears to be what happened. Maybe there is a ray of hope that we can get enriched housing or something under some other aegis. But it is really discouraging to start a program, try to figure out if it works, have everybody say it works and then close it up.

Mr. BONKER. Well, that is why we are here, to see if we can keep it going. At least a while longer. The subcommittee I think feels much better informed as a result of being in Jamestown and having the benefit of your testimony.

I would like to thank Congressman Lundine for his invitation, for his cooperation, that of his staff and also for his leadership in housing. Those of you who are interested in this subject and who reside here ought to be very proud of your resident congressman. Because more than anyone else in the House of Representatives, he has demonstrated leadership in this area. Both in his position on the Banking and Finance Committee which deals with these matters legislatively as well as his ranking position on the Select Committee on Aging.

He has been in the forefront of these programs and his support is steadfast.

We are much better informed as a result of your being here today. We want to thank each of you individually and pledge our continued support for congregate housing and other real programs that help senior citizens in the face of Gramm-Rudman. We are going to have to mobilize whatever political support we can in the days ahead.

Write your local Congressman and write your two Senators to see that those programs remain intact.

Thank you again for coming. The hearing is now adjourned.

[Whereupon, at 4:20 p.m., the hearing was adjourned.]

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APPENDIX

STATEMENT OF ARTHUR L. CHAMBERS, CONGREGATE HOUSING SPECIALIST

I have been invited to express my feelings on Rural Congregate Housing based on my experience at the local "Model" complex known as Portage Hill. I have been involved with Portage Hill and its tenants from the time the first ground was turned and am grateful for this opportunity to talk, not only about the Complex, but also about the overall concept of Rural Congregate Housing.

May I begin by stating that I am a firm believer in this type of housing. Properly managed, it can readily achieve its original intent, i.e., "to keep the elderly independent and out of nursing homes as long as possible", keeping them healthy and happy at the same time is a bonus. Portage Hill attained this goal in its every aspect.

Before delving into the solution, Rural Congregate Housing, may we briefly study the problem. Housing for the elderly, especially those whose incomes are low. The question is, "How are they living today?" and the answer generally is, "Not very well". In our rural areas, many of them live alone in extremely sub-standard conditions, some without running water which means their only toilet facility is the old "outhouse." Others live with their children and grandchildren with six or more individuals to a household. Which alternative would you select to live out your "Golden Years"? Our country seniors as well as their urban cousins, deserve something much better.

Rural Congregate Housing as seen during the "Model Years" at Portage Hill can be a very pleasant and rewarding experience. During the trial period, the tenants were provided two hot cooked meals a day at a minimal expense, home-makers and visiting nurses as needed, transportation for shopping, doctors appointments and the like, entertainment of varying types and on site OFA employees willing and able to listen to their problems and counsel them, this latter a terrific plus to the troubled elderly. Having someone on whose shoulder to cry means a lot at any age.

Portage Hill developed a pleasant home-like atmosphere through the efforts of a caring staff. I can safely say that all of the original tenants were extremely happy and comfortable there during the three year trial run. None were lost of nursing homes through this time frame. As in time of need, both the staff and kindly neighbors were there to help. All anxiety re nursing homes was dismissed in this atmosphere of mutual assistance. The Complex became to all "home as it was in my youth". What more could one ask? Some when invited to their children's homes for holiday visiting responded, "This is my home now".

The funding ended in 1983 and gradually most of the services and the staff were lost. The on-site cooked meals become catered food being brought in from Jamestown. Gone was the aroma and taste of home cooked food and soon the tenants stopped coming to meals and lost not only the nutrition but also the chance to spend an hour or more as part of a group. The cook is still there on weekends, however and on those days, tenant participation is noticeably improved. The staff other than the cook is completely removed from the premises leaving only a management maintenance man there, and it is hard to discuss management problems with one of the management's own employees.

What would I do if asked to maximize the living potential of the rural elderly? I would build as many "Portage Hill" type complexes as possible and run them the way this was run originally. I would screen the employee applicants carefully and hire only the most caring. I would try to find builders who had feeling for the elderly but, in any case, would limit their employees to maintenance and upkeep only. Properly handled, Rural Congregate Housing Units can be a life prolonging gift to the elderly but they need to be more than just buildings. Home cooked meals, transportation, recreation and the like are all needed but a sympathetic, loving, caring and understanding staff is a must. This prescription, properly administered, will

give the recipients a new lease on life and add enjoyable years to their lives. Our elderly deserve a place to live out their lives in a pleasant atmosphere. This is the way to make it possible. It is an idealistic solution, I agree, but with proper supervision can be made to work beautifully as seen in Portage Hill's first few years. True, I am prejudiced, but using it as a model life can be made a whole lot nicer for many elderly and at a cost far less than nursing home care.

Thank you kindly for this opportunity to make my feelings known.

STATEMENT OF GENE SOLAN, COORDINATOR, RURAL AGING SERVICES PARTNERSHIP PROGRAM, NEW YORK STATE OFFICE FOR THE AGING

Mr. Chairman and members of the Committee, my name is Gene Solan, Coordinator of the Rural Aging Services Partnership Program (RASP) at the New York State Office for the Aging. I commend your committee for sponsoring this hearing on the housing and congregate service needs of the rural elderly. I appreciate the opportunity to address this Committee on this critical issue. The Rural Aging Services Partnership Program has been responsible for providing counseling to nearly 1,000 of the most isolated rural elderly at demonstration sites in eight counties of this state. In addition, these housing counselors have helped rural elderly access services that are already available in their counties such as Home Repair, Weatherization, Property Tax Relief, and Home Energy Assistance through centralized screening and coordination in the delivery of these services. The approach of RASP is to make sure that the rural elderly use those services that already exist in order to improve their current housing situation. Simultaneously, Housing Coordinating Councils made up of local community leaders are convened to plan for the development of housing alternatives that are more affordable and currently not existing in their respective counties. Thus RASP has been responsible for developing innovative partnerships and strategies targeted to meet the unique housing needs of the rural elderly.

DEMOGRAPHICS

Let me present you with some basic demographic data which can highlight the housing situation of the elderly. Compared to a 50 percent average home ownership pattern for older New Yorkers, 84 percent of the rural elderly are homeowners. 12.9 percent (180,749 units) of the housing units occupied by the elderly are located in rural areas. Many of these homes were built prior to 1940 and therefore are in need of ongoing repair and weatherization.

It is anticipated that New York's elderly population will continue to grow during the coming decades. In 1980, the 60 plus population was 3,001,774, which represented a 6.3 percent increase from 1970. We anticipate that this increase will continue during the coming decade reaching 3,223,811 persons or 18 percent of the total population in 1990. The most dramatic population jumps will be in the oldest age cohorts. During the current decade, we anticipate that while our 60 plus population will increase 6 percent, our 75 plus population will increase 16 percent to one million by 1990. However, the most dramatic increase will be among the oldest age cohort, those 85 and older. Between 1980 and 1990, it is expected that the 85 plus will increase by 37 percent to 269,572. It is anticipated that these dramatic increases will continue right into the XXI Century.

The ratio of elderly-headed households is also increasing significantly. In 1980, 21 percent of the State's year-round housing units were occupied by the elderly. It is anticipated by the year 2000 that 25 percent of all dwelling units in the State will be occupied by elderly families or individuals.

Longer life expectancy is increasing the number of elderly who are living alone. According to the 1980 Census, 55.4 percent of New Yorker's aged 60 plus was married. Those married among the aged 65 plus decreased to 49.1 percent. For the aged 75 plus, the proportion decreased to 1 out of every 3 or 33 percent. And most of these were widows.

A surprisingly large number of elderly housing units, 77,459 or 5.5 percent, are reported to be without central heating systems. In rural areas, the proportion lacking central heating jumps to 14.4 percent.

Telephones are not available in 63,972 (4.6 percent) units occupied by older households Statewide. The 4.1 percent average for rural areas is slightly better than the Statewide average of 4.6 percent.

17.5 percent of 31,601 of elderly occupied units in rural areas report that they do not have a vehicle. The absence of transportation in rural areas is a critical impediment to maintaining an independent living style and obtaining necessary medical and social services.

Increasing life expectancy has been accompanied by the recurrence of chronic conditions which impede the performance of daily activities. The most prevalent chronic conditions among the elderly are: arthritis, hypertension, hearing impairments, and heart conditions. These chronic conditions impede the ability of many elderly to perform such basic activities such as bathing, dressing, and eating. 40 percent of the aged 65 plus are impaired in the sense that they are limited in some degree in the performance of major daily activities. 18 percent are so severely affected that they are unable to carry out major activities of daily living. By the year 2000, it is anticipated that 20 percent of the elderly will be unable to carry out major daily activities.

The picture that emerges from this data is an ever increasing number of isolated widows living in large homesteads which are poorly insulated and in need of major repairs. Let me suggest what you can do to provide relief for this group of rural elderly.

RECOMMENDATIONS

1. *Home repair programs must be expanded.*—Specifically, the Farmers Home (FmHA) 504 Grant Program should be doubled immediately. The Farmers Home 504 Grant Program exhausts its allocation annually in our State because of the demand for grants. Given the high proportion of rural elderly who own their own homes (84 percent) and the fact that most of these homes were built prior to 1940, it is incumbent upon the federal government to increase existing appropriations as well as develop new programs that focus on providing funds for home repairs. Major repairs must be done on these homes, if the elderly are going to continue to live in them.

2. *Congregate Housing Services need to be greatly expanded in rural communities.*—Specifically, applications for FmHA 515 projects should be awarded extra points for including congregate services. Moreover, the review by the FmHA Central Office in Washington should be eliminated. With the demise of the Farmers Home Administration on Aging National Congregate Services Demonstration, the above mentioned incentives must be put in place in order to stimulate congregate housing in rural areas. In addition, the provision of a rent subsidy would make congregate housing affordable for those most in need.

3. *Implement the Rural Aging Services Program (RASP) nationwide.*—This is a tested program which increases accessibility and insures coordinated delivery of housing services to the isolated elderly. The experience of the RASP Program State-wide has indicated that a blend of local resources

1 Washington St., Box 514
 Ellicottville, NY 14731
 716 699-2075

Greta Bobseine, Executive Director

Cattaraugus County Neighborhood Preservation Corp.

The Rural Aging Services Program

Testimony

11-1-85

Name: Kryn Gillett Hasard

Occupation: Rural Aging Services Program (RASP) Director with the Cattaraugus County Neighborhood Preservation Corporation (a Rural Preservation Company funded through the New York State Division of Housing and Community Renewal)

Location: Ellicottville, N.Y.; target area - entire county

Duties: Individual house counseling for elderly residents; research; creation of programs for the elderly; consultation with and coordination of available services, programs, agencies and departments within the county; grant writing, fund raising, publicity and management of FMHA 515 elderly housing projects.

Staff: 2 Full-time; 1 part-time

People Assisted: Over the past three years RASP has counseled and advised over 300 elderly individuals and 60 programs statewide on housing issues ranging from the normal home repairs to adult protective services, to new construction FMHA 515 housing management. Cattaraugus County experienced a 13% increase in the elderly population from 1970 - 1980. 83% of all elderly are homeowners with 67% of the housing stock built before 1945 and 40% constructed prior to 1920. The median income for those age to 62+ is listed as \$10,500-- although over the past 3 years RASP client have averaged \$5,500 - \$6,000.

Problems: Paramount among housing problems faced by the elderly, are home repairs, maintenance, and the availability of safe and decent housing alternatives. These problems are drastically compounded by very low incomes; isolation, (Cattaraugus County does not have a public transportation system); ignorance and fear of the bureaucracy; a constantly rising cost of living; and poor health. Services are difficult to provide due to the highly rural nature of the county and constant cutbacks in personnel due to budget restraints. (e.g. Public Health Dept.)

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Need:

There is a dire need for home repair grants, and congregate housing services and enriched housing programs. A well administered program for grants home repair is needed for those who are not able or willing to move into subsidized housing projects. On the other hand, subsidized elderly housing projects, congregate housing services, and enriched housing programs will help to eliminate problems caused by low incomes, isolation, poor health, fear, and loneliness, and the lack of good housing alternatives.

For the most part the elderly with whom I come in contact, are courageous and hard working. However the increasing dependence on relatives, or worse, strangers, coupled with loneliness and the constant financial struggle often plunges them into deep depression.

As an illustration I will give a profile of two typical senior citizens who frequent agencies similar to ours.

Throughout 1981, under the auspices of the New York State Rural Affairs Council, the Rural Aging Services Project (RASP) surveyed local housing and elderly service providers and documented the following barriers to the delivery of housing services to rural elderly:

1. Lack of coordination among State and Federal housing and related programs;
2. Lack of technical assistance and information as housing programs;
3. Lack of comprehensive planning for the housing needs of the elderly.

Background of RASP

The State Office for Aging (SOFA) and the Rural Preservation Company Programs (RPC) at the Division of Housing and Community Renewal (DHCR) initiated a two year demonstration project in 1982 in order to eliminate the identified barriers. Four counties, those of Cattaraugus, Essex, Sullivan and Wayne, were chosen as appropriate sites for implementation of the RASP project due to their rural, poor, and aging populations.

In Cattaraugus County, RASP originally under the direction of Eastside Neighborhood Organization for Development (ENOD), after six months was transferred to the Cattaraugus County Neighborhood Preservation Corporation (CCNPC) under the direction of Greta Bobseine.

During this time period RASP:

1. Employed a housing counselor, to provide housing counseling to rural elderly clients including assessment of current housing situations, discussion with client of possible housing alternatives and development of a plan of action including completing applications for available housing, energy repairs, and tax relief programs.

2. Established a local Housing Coordinating Council convened by RASP that identified housing needs of the county's elderly and developed a comprehensive plan to address those needs.

3. Provided housing information and technical assistance to local providers on available housing programs.

4. Developed grant proposals involving new housing development and initiated new program funding.

Through RASP a "one-stop-shop" for housing assistance has been made available to the elderly in Cattaraugus County. Housing assistance includes seeking funds, or creating programs, that serve to fulfill a clients "bricks, and mortar" needs, as well as the needs for support services necessary to maintain an independent life-style. Referrals are made to the appropriate local support service (The Cattaraugus County Office for Aging, Social Security Administration, Weatherization, FmHA, Department of Social Services, Rural Revitalization, Home Health Care of Cattaraugus County etc.) with coordination and follow-up conducted by the Housing Counselor, Kryn Gillett Masard.

Through the efforts of DHCR and SOFA, manuals on site visits, workshops, seminars and other forms of technical information, instruction and support are provided to the housing counselors on a regular and consistent basis.

The four RASP projects in Cattaraugus, Essex, Sullivan, and Wayne Counties were, and are, very similar in structure and content, however each has developed a distinctly individual character and flavor intrinsically inherent to its particular locale. The degree of cooperation and participation of local service agencies and departments in the RASP project is of extreme importance and appears directly in proportion to the reputation of the individual RPC and the historical nature of the particular service provider.

The CCNPC has an excellent working relationship with all county and private service providers which has enhanced the effectiveness of RASP in Cattaraugus County. Within such relationships, the mutual appreciation, respect and understanding is in place for necessary interagency cooperation in assisting clients.

Since the beginning of RASP with the CCNPC in November 1982 over 200 clients have been assisted with housing related problems. Public and private housing service providers have also received informational and technical assistance from RASP enhancing housing options for area elderly. With close cooperation among RASP, CCOFA, RRC, DSS, The Social Security Administration, and FHMA more elderly have been effectively assisted with their individual housing needs than ever before in the history of Cattaraugus County. The Volunteer Assistance and Labor Undertaken for the Elderly (VALUE) program created through RASP in conjunction with St. Bonaventure University Campus Ministry, under the direction of Mary Trinity, has provided free or low cost home repairs to the elderly in the Greater Olean Area. Contributions from Catholic Charities and The Greater Olean Association of Churches (GOAC) allow VALUE to purchase necessary tools and equipment to enable the student volunteers to assist the elderly in small home repairs, such as painting houses, repairing porches, steps, etc.. RASP applied for a Rural Area Revitalization Program (RARP) funds in 1983 in order to provide "bricks and mortar money" for elderly clients. Although the application was "deemed of high quality" it went unfunded as it raised a complex legal question. The New York State Constitution (Article VII) contains a prohibition on gifts and loans of state funds for private benefit. In light of this determination it has been found more rewarding and profitable to turn to such organizations as the GOAC for assistance. 1984-85 VALUE has grown in recognition and accomplishment. More elderly in the greater Olean area are being served than ever before and the geographical area has grown to include Salamanca.

The GOAC, with the assistance of the CCOFA, applied for and received a \$150,000. grant for the Inter Faith Volunteer Caregivers Program (IFVCP). The RASP program has been placed on the IFVCP Board of Directors and is closely associated with all facets of the program in an advisory role - due to the closely related nature and objectives of both RASP and the IFVCP. Basically the IFVCP divides the Greater Olean area into five neighborhoods including Hinsdale, Portville, the City of Olean, Allegany, and Southern Olean. Under the direction of five (5) neighborhood assistants, over two hundred (200) volunteers will be organized to provide respite, transportation, small home repair, and other related services to the elderly and handicapped (in their neighborhood) who are in danger of institutionalization. This program will utilize all service providers in the County, relying on professionals when appropriate, thus enhancing the coordination among agencies and improving delivery of services. This program, with the intense involvement of the churches, service providers, and RASP, is a most worthwhile attempt to reduce service barriers to the elderly. The reduction of service barriers to the elderly is the very essence of RASP. The RASP counselor served on the Board of Directors from 1983 to 1985 recently resigning in order to create more time for CCNPC housing management duties with the various FmHA Section 515 developments.

Researching, investigating and assisting in the development of housing alternatives for the elderly has involved RASP in:

1. The CCNPC, FmHA Section 515 Housing Project in Ellicottville, Delevan, Randolph, and Frewsburg, New York.
2. The Shared Housing Option: Enriched Housing, Homeless Housing, Housing Trust Fund, and RARP Programs.
3. Successful application for \$22,000. through the RARP grant.

Besides attending seminars, various existing housing program sites, conferences, and meeting with government officials, RASP has initiated grant applications for housing certifications and funding sources. Seeking funding for volunteer repair programs for the elderly, such as VALUE, has become an on going RASP commitment since financial resources in the area tend to be rather limited with fierce competition from other

worthwhile endeavors for those funds that may be available. RASP is constantly re-examining the priority of need among the elderly population and how to manage available resources. In order to publicize this need the RASP counselor has been on WMNS in Olean, New York and given a lecture at St. Bonaventure University to students as well as utilizing other forms of media.

With its very existence based on the reduction of service barriers confronted by the elderly, RASP is most closely associated with the Cattaraugus County Department of the Aging. Not only does the Department of the Aging provide RASP with referrals, but also assists and advises on grant application, need assessments, and overall direction. The RASP coordinator spends one afternoon a week in the DOA office making contact with clients, consulting with staff, providing follow-up etc.. Thanks to the involvement of the DOA, house counseling for 1985 expanded from primarily the Olean area to include the far reaches of Cattaraugus County from Conewango Valley to Yorkshire to Lyndon to Gowanda. In 1985 the individual house counseling took a new direction as the RASP counselor has been drawn into the increased housing development activities of the CCNHC and Cattaraugus Rural Housing. The RASP counselor will increase its housing management responsibilities by assisting the elderly inquiring into new housing as well as publicizing, preparing, educating, and moving area elderly into the new housing upon its completion.

In conclusion RASP has enjoyed a very stimulating extremely broad spectrum of experiences involving client casework, public relations, housing development, education opportunities, and administrative duties. Coordination of agencies and available resources within the county and region has been involved CCNHC/RASP in the Network in Aging of Western New York Inc. Along with other interested service providers in Western New York, RASP has been involved in establishing a mechanism to channel

the needs of rural agencies and professionals in a southwestern New York satellite group.

In 1985 the RASP counselor was elected to The Cattaraugus Development Corporation Board of Directors which involves the utilization of Section 8 Rent Subsidies. The type of involvement coupled with the close working relationships of RASP with agencies such as the Rural Revitalization Corporation and the County Office for the Aging have promoted the effective delivery of services as yet unprecedented in Cattaraugus County. For example, The Warming House in Olean, New York servicing as a soup kitchen and referral source for the homeless and transients was able to obtain an industrial mixer (valued at over \$1,500.) through RASP as well as \$2,479. to provide equipment and supplies. This is the first time the students of an area school have been made aware that donations from Senior classes can provide concrete assistance to local people in need, instead of always sending money from Cattaraugus County out of the area to assist those elsewhere. By helping people in Cattaraugus County - we can help ourselves.

TESTIMONY SUBMITTED BY

CESAR A. PERALES
COMMISSIONER

NEW YORK STATE DEPARTMENT OF SOCIAL SERVICES

TO THE

UNITED STATES HOUSE OF REPRESENTATIVES
SELECT COMMITTEE ON AGING
SUBCOMMITTEE ON HOUSING AND CONSUMER INTEREST

ON

HOUSING AND SUPPORTIVE SERVICES
FOR THE RURAL ELDERLY

NOVEMBER 1, 1985

I am Cesar Perales, Commissioner of the New York State Department of Social Services. I am pleased to have the opportunity to present testimony to the House Sub-committee on Housing and Consumer Interest on services for the rural elderly. I would like to describe for you today a program called Enriched Housing that the New York State Department of Social Services began as a small demonstration program in 1978. This program currently has a capacity to serve over 500 frail elderly at 45 sites scattered throughout New York State.

Enriched Housing is designed to expand the choices presently available to elderly persons who, because of disabilities and health conditions associated with the aging process, are no longer able to live independent lives and who require a protective residential placement. This type of community based residential care for adults consists of scattered site, small congregate living arrangements where comprehensive support services are shared. A private not-for-profit or public agency operates the program and is responsible for selecting residents, securing suitable housing and providing required services in conformance with standards established by the New York State Department of Social Services.

Participation in the program is primarily for persons aged 65 or older, who have such a degree of functional impairment that, in the absence of Enriched Housing, independent living would be precluded. A person's service needs, however, must not require continuous medical, nursing care or supervision or on-site residential staff supervision. "Functional impairment" for Enriched Housing purposes is defined as disabilities and health conditions which prevent an individual from performing on a regular basis the normal activities of daily life necessary for independent living.

Enriched Housing programs utilize existing housing. Recognizing the differences in available housing across the state, a number of different living arrangements are possible. Programs may be located within private or publicly subsidized housing, including buildings for the well elderly. Various models are possible including shared multi-bedroom apartments, combinations of efficiencies, or one bedroom apartments in close proximity to each other. In order to preserve a non-institutional

environment, only a small percentage of the units in any large multi-dwelling building or apartment complex may be devoted to Enriched Housing. Single family dwellings are allowed only if they are not institutional in nature and are integrated within the community. Sites are selected on the basis of proximity to residential neighborhoods, commercial areas and community services. Residents are encouraged to retain their individuality, for example by bringing their own furnishings and personal possessions for their rooms or individual apartments. In the case of shared dwellings, the units should afford sufficient space to allow for individual privacy.

In recognition of special needs of the frail elderly, the physical environment (interior and exterior) must incorporate design features, such as grab bars, to reduce hazards and facilitate independent living. In addition, buildings must be properly equipped with effective locks, alarms and other protective devices which enhance building security.

Programs are located in areas where residents have ready access to available community services.

In shared dwellings each resident is provided his or her own bedroom. Basic household items intended for common use are provided by the sponsoring agency. Again, residents are encouraged to bring their own furniture for their personal rooms or apartments. In cases where essential items are lacking, the sponsoring agency will supplement an individual's bedroom furnishings. To the extent feasible, residents have the opportunity to modify the environment to express their personal and shared tastes. All occupants have access to radios and televisions either in their individual units or in shared areas. Each dwelling unit should have at least one telephone.

A systematic program of supportive services is made available to each resident, by the sponsoring agency. These include:

1. Meals

Each resident is assured a sufficient, well balanced, varied and nutritious diet. In both shared and individual units residents are required to participate in at least one congregate meal each day provided by the sponsor. In addition, each resident is assisted, as needed, with shopping for and preparation of food for other meals and snacks. Residents are encouraged to participate in planning and preparation of all meals.

2. Housekeeping

Each resident is provided weekly housekeeping services sufficient to maintain a clean and well-kept living environment. Such services also include the purchase and replacement of household items for common use such as light bulbs and toilet paper.

3. Personal Care

Each resident is provided assistance in performing the activities of daily living such as assistance in grooming, bathing, dressing and taking self-administered medications. Providers of such services should be mature, reliable persons and properly trained in the performance of these duties.

4. Social and Emotional Support Services

A professional social service staff, skilled in working with the elderly, supervises and coordinates the provision of all services to residents. In addition, the social service staff provides other support services including: counseling of residents and their families to facilitate adjustment to the program; weekly, more frequent if required, meetings to resolve grievances, assist in planning activities, and to promote the well-being of residents in general; assistance in obtaining other services, including medical and dental care, and benefit entitlements such as Medicare and Social Security payments; and assistance in finding alternate living arrangements for residents when the Enriched Housing program is no longer appropriate.

5. Assistance in Shopping for Personal Needs

Residents are assisted, as required, in shopping for personal items such as toiletries, medical supplies, books, etc. Such assistance is available on a frequent and regular basis.

6. Assistance in Doing Laundry

Residents are assisted as needed with laundry in order to maintain a clean wardrobe and have available, on a weekly basis, clean towels and linens.

7. Periodic Heavy Housecleaning

Residents are provided heavy duty cleaning, including vacuuming, floor washing and oven cleaning, at least monthly to ensure the maintenance of a clean, pleasant, and healthful living environment.

8. Arrangements for Essential Transportation

Residents are assisted in arranging for transportation for obtaining medical and dental care and other essential services. In cases where special transportation (e.g., elderly escort services) and/or public transportation is not available or accessible, the agency provides necessary transportation.

9. Leisure Activities

Enriched Housing offers the resident an environment conducive to the continuation and strengthening of family ties and friendships as well as the pursuit of previous or newly acquired intellectual, social and recreational interests. The sponsor helps to make residents aware of available neighborhood programs and events and assists in arranging transportation to such activities; assists the residents in organizing activities such as current event discussion groups, crafts, card games and excursions to movies, concerts, and restaurants, and directly provides periodic leisure activity programs which residents are free to participate in, as desired.

10. Established Protocols and Dealing with Emergencies and Obtaining Medical Care

Residents are provided 24-hour emergency coverage by a responsible person or

persons associated with the program. Clear, written procedures for dealing with crises and emergencies are in place along with procedures for obtaining emergency medical services. Local hospitals, ambulance, police and fire departments are apprised of the presence of high risk residents in the neighborhood and furnished essential information. All residents are provided easy access to a telephone near which emergency numbers are posted.

Residents of Enriched Housing pay the program sponsor a contracted amount each month for the services provided. The amount charged is specified in a signed agreement between the sponsor and the resident. The agreement also lists the services available to the resident. The monthly charge is usually all-inclusive to cover housing (including utilities, telephone, etc.) food, and all of the services previously outlined. In some programs, residents pay their own rent, utilities, etc. Lower income residents may be eligible for financial assistance from New York State. The state supplements the federal Supplemental Security Income (SSI) benefit for eligible Enriched Housing residents at the congregate living level II. The combined monthly benefits total \$720 in New York City, Nassau, Suffolk and Westchester Counties and \$690 in the rest of the State. Of these amounts, \$56.93 are protected for residents' personal needs.

Programs are inspected by the State Department of Social Services at least twice yearly to insure quality of care and conformance with Department standards. In addition, regular fiscal and program reports are required.

Two needs that must be taken into consideration when discussing the maintenance of an older person in a rural setting are housing and support services.

Regarding housing, the rural older person often resides in a house that previously provided housing for an entire family. The cost of running and maintaining such a home by a non-working, older person is often prohibitive. The older person often recognizes this fact but because of a lack of local alternatives, stays as

long as possible even if it means a dangerous cutback on essential items such as food and heat.

With regard to support services, the older a person gets, the greater the likelihood that he or she will need some kind of assistance to maintain the day to day functions of their lives. In earlier times, persons not capable of completely independent living moved in with other family members or into institutional settings. Today's smaller homes, working spouses, mobile and smaller families make the familial alternative less available. As a result, options other than institutional care have been developed. This has been particularly important in rural areas, where accessibility to alternatives such as meals on wheels, senior citizens centers, home care, etc., however, are often difficult for the older person. The lack of public transportation further hinders the rural older person from using such services.

Enriched Housing is particularly well suited to rural areas because of its emphasis on small programs that are community integrated and sponsored by local agencies. The inherent flexibility in the design of Enriched Housing which allows programs to be developed using a number of different housing and service configurations further enhances development of programs in rural areas. Working with the State Office for the Aging, New York State Division of Housing and Community Renewal and the Farmers' Home Administration, we have targeted rural areas as a priority for program development. Efforts in this regard have paid off. The last 10 program sites approved are all in areas serving rural populations. In addition, half of the applications to develop new programs are for rural serving areas. The State planning and development funds which have been made available to approved program sponsors have proven particularly helpful to the small rural agency. Without these State funds, most would not have been able to absorb the costs associated with implementing a program.

It is the Department's intention to continue to encourage the development of Enriched Housing programs in rural areas. We recommend that this sub-committee look at the success of the Enriched Housing program in serving the rural elderly and support the further development of additional service programs to help sustain our rural elderly in their communities.

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